



2053 High Ridge Rd,
Boynton Beach, Fl 33426
561.296.7467

125 Carolyn Blvd
Farmingdale, NY 11735
631.249.2525

12 Commerce Rd
Fairfield, NJ 07004
973.887.3700

www.acfgardner.com

CREDIT CARD AUTHORIZATION

Date: _____

To: **ACF-GARDNER**

Please use this letter as authorization for:

MUST Enter Information as it appears on your Credit Card bill

Name _____
(Exactly as it appears on the card)

Business Name (if applicable): _____
(Exactly as it appears on the card)

Billing Address: _____
(Must enter the address exactly as it appears on your credit card bill statement)
(Street Address-1)

(Street Address-2)

(City) (State) (Zip Code)

To use my: (check one) AMEX MC Visa Discover Debit Card

Card Number _____ Exp. Date (MM/YY) _____

Security Code (CVV/CVV2) - 3 Digit Code on back of card _____

Order # _____ Date ____/____/____
or
Invoice # _____ Date ____/____/____

PAYMENT AMOUNT (sub-total) \$ _____

VISA/MC/Dscvr X 2.5% credit card fee _____

AMEX X 3.5% credit card fee _____

(\$10 minimum credit card fee)

Total to be charged (\$) \$ _____

MUST PRESENT US WITH A COPY OF YOUR DRIVERS LICENSE

By signing below, I/we agree and authorize GFS Distributors LLC, ACF-GARDNER, Spectrum Vinyl and any of its subsidiaries, or its financial institution to charge my account for the amount due on each invoice, and I/we agree to Terms and Conditions of Sale TC 1/14/2019 (and any and all future revisions).

must initial all lines below

All specials, drops, closeouts and products/services ARE sold "AS IS" and all sales are final.

All special orders are NOT CANCELABLE.

All loaner samples must be returned within 2 business days or I approve this charge.

This signature authorizes the merchant, Gardner Industries, to hereby utilize this payment/bankcard information for all future sales until further notice.

Furthermore, I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that any amount charged or attempted to be charged to my credit card is declined.

Authorized by:

Signature

Print Name

Date