



Credit Card Payment Authorization Form

Sign and complete this form to authorize D Now Inc. to make a one time debit to the credit card provided below. All information in section (1) is required. Use your email address if you do not have a physical address for your business.

By signing this form, you give D Now Inc. permission to debit from the provided account on the indicated date/terms. This permission only applies for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Section 1: Confirmation & Customer Info (required)

I, _____, (clearly write *full name*.) authorize D Now Inc., (Uncle Bubble) to charge my credit card provided on this form for the amount of _____ indicated on the following invoice:

***Invoice#:**

*D Now Inc. will generate this #

Business Address	Credit Card Billing Info
Company Name:	Name on CC:
Address:	Address:
City:	City:
State and Zip:	State and Zip:
Business Phone:	Mobile Phone:

Section 2: Transaction Info (fill only A or only B)

<p>A. Fill this out for first time transactions or if you do not have your Customer ID on hand. First time customers are charged upon receiving our product, email us if you require different terms. We accept Master Card, Visa, Discover and American Express.</p>	<p>B. Fill this out if you know your Customer ID. You can also email us and we will provide you with the Customer ID if you are a repeat buyer. Not all our repeat customers have the CV on file. We will send out an email if this information is required.</p>
Card Type:	Customer ID:
CC Number:	Last 4 digits on CC:
CV (3-4 digit security #):	Terms (check one): <input type="checkbox"/> immediately <input type="checkbox"/> Net 30 <input type="checkbox"/> Net 60 <input type="checkbox"/> other*(email us)
Expiration Date: /	

Section 3: Signature & Contact Procedure

I authorize D Now Inc. with the the indicated amount in section (1) to charge the credit card number provided on this form according to the terms outlined above. This payment authorization is solely for the present invoice shown in red,* of which is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company, so long as the transaction corresponds to the terms indicated in this form.

Signature: _____ **Today's Date:** _____

To provide you with the best customer service, please also include your email and contact person at this time. We understand not all orders are placed by the business owners themselves. To better direct our correspondence indicate if your contact information is *yourself, or *a buyer. For *non-business owners*, we will direct information by *email only*.

Email:

Contact Person:

self buyer