



To: \_\_\_\_\_ Date: \_\_\_\_\_

From: \_\_\_\_\_

For PO: \_\_\_\_\_

Dear Valued Customer:

Thank you for your order. We will process it using your credit card as agreed. To help prevent credit card fraud, we are taking this extra step to ensure your protection against unauthorized charges.

Please complete this form and email it to your Customer Service Rep and **include copies of the credit card and a form of identification.**

Print Credit Card Number: \_\_\_\_\_

Print Expiration Date: \_\_\_\_\_ Print Security Code: \_\_\_\_\_

I authorize the use of the above credit card as payment for transaction(s) with Agrigenic Foods, LLC. I understand that this order may be non-returnable or subject to restocking; any questions may be addressed at the time of order.

Check one:

- This is a One-time Authorization.
- Keep card # on file for future purchases.

\_\_\_\_\_  
Printed Name (Must be same as the name on card)

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Billing Street Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Company Name