PFI Phase 4 Investigations

CREDIT CARD AUTHORIZATION FORM

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Name as it appears on the card: _____

Mailing address this card is billed to: _____

City: _____

State: _____ Zip: _____

Card Number: _____

Card Type: _____ _____ **Expiration date: _____ / _____**
Visa Master Card **Month Year**

Card Verification Number: _____

This number is on the back of the card and is the last three numbers separate from the other numbers

Amount to Charge: _____

Michigan Residents
Add 6% Tax on
Non-service related items: _____

Total Amount Charged: _____

Charge on this card will appear as "Phase Four"

"I authorize Phase Four Investigations / Sterling Spy Gear and its representatives, to process a charge on the above account, for deposit into the agency account and credit any outstanding invoices, as follows"

_____
Card holder's signature

_____
Date

Your Credit Card will be verified with the bank prior to commencement of your requested service and before the release of any information