



Personal Computer Systems, Inc.

Credit Card Permission Form

Agreement

By signing this form, I am granting PCS, Inc. permission to charge the credit card listed below for the amount shown.

Name of Company: _____

Name of Card Holder: _____

Billing Address of CC: _____

City: _____ State: _____ Zip Code: _____

Card Type (Circle One): Visa, Master Card, Discover, American Express

Card Number: _____

Expiration Date (MM/YY): _____

CVV Code: _____

Amount: \$ _____

Keep Credit Card on File for Future Use? (Circle One) Yes / No

Signature: _____