
Credit Card Use Authorization

By my signature below, I specifically authorize Learned Lumber to bill my credit card for purchases made at Learned Lumber.

My Credit Card is a () VISA () MasterCard () American Express () Discover

Card number: _____ Expires: _____ Security#: _____

Printed Name as it appears on the Card: _____

Mailing Address of Cardholder (Must match billing):

Name: _____

Address: _____

City/St/Zip: _____

Daytime Phone Number: _____

The following are also authorized to use this card for purchase from Learned Lumber:

Learned Lumber agrees to discontinue use of this Credit Card upon request.

Estimated Job Completion Date: _____

Comments or Further Instructions: _____

Authorized by:

(Signature)

(Date)

Contractor Name

Account & Job #

Job Address