

## **Credit Card Authorization**

1869 Moffat Blvd., Manteca, CA 95336 • HEADQUARTERS • Office 209.824.5500 Fax 209.824.5575

## **Authorization for Credit Card Use**

PRINT AND COMPLETE THIS AUTHORIZATION AND RETURN. All information will remain confidential

Name on Card:
Billing Address:
Credit Card Type: Visa Mastercard Discover
Credit Card Number:
Expiration Date:
CVV: (last 3 digits located on the back of the card)
Amount to Charge: \$ (USD)
authorize to charge the amount listed above to the credit
card provided herein. I agree to pay for this purchase in accordance with the issuing
pank cardholder agreement. Please note, there is a 3% transaction fee when using a
coank cardholder agreement. Please note, there is a 3% transaction fee when using a credit card.
credit card.
C <b>redit card.</b> Cardholder – Please Sign and Date

\*\*\*Site visit fee's non-refundable after 24 hours of payment, except for Workmanship related Issue's\*\*\*

Return the completed and signed form to the following: 1st Light Energy, Inc./1st Light Sales Corp Attention: Service Department customerservice@1stle.com