



1940 E. Locust St. Ste., A Ontario, CA 91761

CREDIT CARD AUTHORIZATION FORM

American Express / Mastercard / Visa / Discover

CARD NUMBER: 4520 7100 5766 0133

Expiration Date: 05/29 / /

CVV Code: 933

CARD HOLDER'S NAME: 933

Billing Address: 9099 141b street

City: Surrey State: BC Zip Code: v3v8e2

Card Holder's Phone Number (604-445-1662) -

Charge Authorized Amount: \$ 2,048.70 and future amounts

Card Holder's Signature: Vishal Mutti

Card Holder's Name Vishal Mutti
(Please Print Name)

I, Vishal Mutti, hereby authorize UPAK, to make charges in the amount of \$ 2,048.70 to my Credit Card in consideration for products as requested by me.

Today's Date: June 7, 2024

Charge mentioned on statement will appear as "UPAK". Fax Back To: (909)544-4770