

Credit Card Payment Authorization Form
(To be kept on file for future payments)

Credit Card payments are accepted for Invoices or prepayments of \$5,000 USD or less. If your invoice or prepayment exceeds \$5,000 then please use the ACH payment authorization form.

I hereby authorize **Oglesby Plants International, Inc.** to charge my bill directly to the credit card listed below. Since the payment amount may vary, I understand that I will receive written notification of the amount and date of any charge applied to this credit card prior to each scheduled transaction date. This authorization is valid until I provide you with a written cancelation.

Please mail, fax (recommended) or email the completed form to:
Oglesby Plants International, Inc.
15168 N.W. Oglesby Road
Altha, Florida 32421
Fax: 1.850.762.4552
Email: pats@oglesbytc.com

Please complete the information below:

I _____ authorize **Oglesby Plants International, Inc.** to charge my credit
(full name)
card account indicated below:

Company Name _____

Billing Address _____

City _____, State _____, Zip _____

Phone _____ Email _____

Please check if you would like your receipt emailed to the above email address or if you prefer a different email address entered here _____.

Account Type: Visa MasterCard American Express

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV2 (3 digit number on back of Visa/MC) or CID (4 digit number on front of AmEx card) _____

SIGNATURE _____

DATE _____

I authorize the Oglesby Plants International, Inc. to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.