



AQUA-LIFE WATER SYSTEMS, CO.
1369 W Washington Blvd., Los Angeles, CA 90007
TEL (213)747-0001
FAX (213)516-3989
www.aqualifewater.com

ONE-TIME USE CREDIT CARD AUTHORIZATION FORM

Name: _____ **Date:** _____

I, _____, authorize Aqua Life Water Systems, Inc. to charge on my credit card the following:

Amount to be charged: \$ _____ U.S. Dollars

Credit Card Information:

Credit Card: _____ **M/C** **Visa** **Amex** **Discover**
(please circle one)

Credit Card Number: _____

Expiration Date: _____ / _____ / _____
(month) (day) (year)

Credit Card Bill To Address: _____

City State: _____

Bill To Zip Code: _____

Signature Panel Code: _____
(AMEX 4 Digit on Front of Card DISC MC/VISA 3 Digit on Back of Card)

Cardholders Name: _____
(exactly as it appears on the card)

X _____
(signature of cardholder)

For office use only:	
Customer #: _____	Order #: _____
Approval Code: _____	Batch: _____