



Credit Card Authorization Form

Name on Card: Ellen E Bowen

Company Name on order: Kill Cliff

Order # 5340

Email for receipt: ellie@killcliff.com

Type of Card: Visa MC AmEx Discover Other: _____

Account # 379645783771004

Expiration Date 11/24

Security Code: 5449

Billing Address 199 Armour Drive NE, Suite D

City, State, Zip Code Atlanta, GA 30324

Phone Number:: 480-510-4465

Product Total: \$1355.00

Shipping Total: \$116.68

Charge Total: \$1471.68

Name Printed: Ellie Bowen

Signature: *Ellie Bowen*

Date: 9/22/2021