

Credit Card Authorization Form

Name on the Card: Michael Hernandez

Type of Card: Visa MC AmEx Discover
Other _____

Account Number 3716 971991 91002
Expiration Date 12-27
Security Code 5715 (256)
Billing Address 816 N. Marine Corp Dr
City, State, Zip Tamuning GU 96913
Phone Number 671 688-1121

Order/Invoice Number Est. # 7073

Item(s) Purchased _____

Amount to be Charged \$6147.92

By signing this form, you authorize
to charge your card for the amount listed above.

Signed:  _____

Date: 4-21-23