



EASTERN WATCH CO.

Wholesale Distributor • Importer

1233 S BROADWAY
LOS ANGELES, CA 90015
(213) 746-9109 FAX: (213) 746-3234

Email: easternwatch@covad.net • sales@easternwatchla.com

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Spoke With

CREDIT CARD AUTHORIZATION FORM

BILLING INFORMATION:

Company Name:	
Person Authorizing:	
Credit Card Type:	Visa [] MasterCard [] Amex []
Issuing Bank:	
Credit Card Number:	
Enter CVC Number:	(Last 3 digits from the back of Card)
Expiration Date:	
Billing Address:	
City:	
State/Providence:	
Zip/Postal Code:	
Country:	
Phone Number:	
Fax Number:	

PLEASE SELECT ONE OF THE FOLLOWING PAYMENT OPTIONS:

Once: []	Bill my Credit Card once for the following amount: \$ _____
Every Purchase: []	Bill Credit Card on every order I placed; verbally or written approved by me.

Applicant agrees that all information provided is accurate and complete. Applicant acknowledges that the amount charged will be reflected on the credit card statement within seven days of authorization. Applicant understands that Eastern Watch Co does not have an imprint of credit card and approve the use of this authorization as a substitute.

Authorized Signature: _____ **Date:** _____

A fax copy of this form shall be construed to contain the same right, privilege and authority as if bearing an original signature.