



Credit Card Authorization Form

Sign and complete this form to authorize **Karas Wireless** to make a debit to your credit card listed below. By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date.

Requirements: Credit card copy of the front & back of card, a copy of your Driver's license is then required.

Please fill out the form below:

Name on the Card:

Type of Card: Visa MC AmEx Discover Other

Credit card number:

Expiration Date Security Code

Billing Address

City State Zip

Order/Invoice #:

Amount to charge:

Signature: _____ Date: _____

I authorize the above named business 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 & or a **BLANKET Authorization to use the credit card for orders. If not, the charge will not be authorized.**

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.

3560 Northwest 72nd Ave.
Miami, FL – 33122, USA
Tel. 305-888-8485
info@gsmcitysc.com