

NT Trading INC.



Credit Card Authorization Form.

Type of Card and Handling fee: Visa ___3% MC ___3% AmEx ___4%

Name on the Card: _____

Card number: _____

Expiration Date: _____

Security Code: _____

Billing Address: _____

City, State, Zip: _____

Phone Number : _____

Order/Invoice Number: _____

+++++

Item(s) Purchased: _____

Amount to be Charged: _____

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

Signed: _____ Date: _____