

Credit Card Authorization Form



SURIA COMPUTER CORPORATION

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Suite 123
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CA
92606

Tel : 714 - 851 - 0596
Fax : 714 - 851 - 0598

I hereby authorize **SURIA COMPUTER CORPORATION** to charge my Credit Card for purchases as per invoice that are subject to Standard Terms & Conditions of Sale.

VISA		MASTER		AMEX		DISCOVER	
Credit Card Number					Expiry Date		
Name & Address (as per Credit Card Statement)							
Signature					Date		

If you wish to use this form for all future purchases please sign and date.

Signature					Date		
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Thank you for your purchase.

Yours Sincerely

Accounts Department
SURIA COMPUTER CORPORATION.