



MelroseMAC™

Hollywood & Burbank
www.melrosemac.com

**SINGLE PURCHASE / ONE TIME USE
CREDIT CARD AUTHORIZATION FORM**

NAME: _____

PHONE NUMBER: _____

I _____ authorize MELROSE MAC, INC. to charge my credit card number _____ which expires _____ / _____ with security code* _____ in the amount of _____ for:

Invoice number/Amount: _____

Invoice number/Amount: _____

MY SALES REP IS _____
At Burbank or Hollywood (circle one)

BILLING ADDRESS:

NAME ON CARD: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

By signing below, I agree to pay the amount mentioned above according to the card issuer agreement.

Signature: _____

Date: _____

We appreciate your business and thank you for being our customer!

PLEASE ENCLOSE A PHOTOCOPY OF YOUR ID AND CREDIT CARD

If purchasing at Burbank Store, fax to 818-840-8422.

If purchasing at Hollywood Store, fax to 323-937-4664.

*Visa/MasterCard – last three digits on the back of card.
American Express – four digits on the front of card