

Date

PROper Technologies, Inc. 29115 State Highway 27 Guys Mills, PA 16327 Phone: 814-789-2768 www.propercutter.com

## **Credit Card Authorization Form**

l,	authorize PROper Technologies Inc.
D/B/A PROper Cutter to charge my credit card above for	agreed upon purchases. I understand
that my information will be saved to file for future transact	tions on mv account

**Credit Card Information** 

Name as Appea	ars on Cred	it Card					
Type of Card	Visa	Maste	erCard	Americ	an Express		
Credit Card Nur	mber				_ Expirati	on Date	/
CVV (3 digits or	n back of Vi	sa or Mast	erCard) _				
CVV (4 digits or	n front of AM	ЛЕХ)					
Zip Code of Cre	edit Card Bil	ling Addre	SS				
Email Address f	for Receipt						
Telephone Num	nber						
Signature of Ca	rdholder /C	ompany R	epresenta	ative			

Please complete all fields. New customers first orders will be paid by credit card until NET 30 terms are established. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled. A 5% service charge will be added for credit card payments.

Please email this form to customerservice@propercutter.com

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