

Credit Card Authorization Form

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF BROWARD

I, _____ (print name) do hereby swear
or affirm that

1. I, have tendered \$_____ on Credit Card/Debit Card (Visa, MasterCard, Discover) #_____ for payment of Fireline Farms.
2. Accordingly, voluntarily, knowingly, and intelligently enter into the contract fully aware that any payment made in satisfaction of Fireline Farms' services is not **refundable or subject to a charge back.**
3. I fully understand the meaning of all terms of this affidavit and agree not to charge back any money tendered to Fire Line Farms in satisfaction of the contract.

FOR AN OATH AFFIRMATION:

(Print Name)

STATE OF FLORIDA
COUNTY OF BROWARD

(Sign Name)

Sworn to (or affirmed) and subscribed before me on _____-2021 by _____

Credit Card Info

Name on Credit Card _____ Type of Credit Card _____
Credit Card Number _____ Credit Card Exp. _____
Credit Card Code _____