

Credit Card
Charge
Authorization



RECELLULAR
HELLO AGAIN.

2555 BISHOP CIRCLE WEST
DEXTER, MI 48130
PHONE 800-441-1544

Date: _____
Sales Person: _____
Customer No: _____

Please Print Clearly IN BLOCK LETTERS

Copy Credit Card Here

Sign Here

X

I agree to Pay The Amount noted as the Charge
Amount According To The Card Issuer Agreement

Customer Name: _____
Cardholder Name _____
Credit Card # _____
Expiration Date _____ CSC# _____
Credit Card Account Billing Address: Must Match
Street Address _____
City/State/ Zip _____
Charge Amount _____

Internal Use Only

Sales Order # _____
Approval Amount _____
Approval Number _____
Invoice # _____
Invoice Amount _____

Please Fax To ReCellular at 734-205-2312