



1265 chemin de la Canardière
 Québec, Qc G1J 2C5

Tél.: 418-525-5959 Fax: 418-525-6976

Mail : ventes@ctoucanada.com - Web: www.ctoucanada.com



Credit card authorization form

When an order needs to be shipped to an address different from the billing address, or on order over 100\$, we need to obtain authorization. You can either add the second address as an authorized alternate shipping address by contacting your credit card provider, or you can complete and fax the form below back to us.

Instruction

1. Complete the form below by printing legibly with a dark pen, all billing and shipping information in the blanks.
2. Sign with the credit card holder's signature on the line indicated.
3. Include a photocopy of the front and back of the signed credit card.
4. Fax all this form, along with the photocopy of the signed credit card, back to us by fax at 418-525-6976 to complete your order.

I _____, hereby authorize CTOU INC. to charge my credit card account in the amount of _____ \$ (Plus shipping and/or taxes, if applicable).

Type of card : VISA MASTERCARD

Credit card number : _____

Expiration date : _____

CVC Code (last three digits on the number on the back of the card) _____

Credit Card Billing Address

Requested Shipping Address

Address : _____

Address : _____

City : _____

City : _____

State: _____

State: _____

Postal code or zip code : _____

Postal code or zip code : _____

Téléphone : _____

Téléphone : _____

As the credit card holder, I hereby authorize receipt of merchandise at the shipping address above

Cardholder's signature : _____

Date : _____

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. All information entered on this form will be kept strictly confidential by CTOU INC.

Complete and fax all documents required to : 418-525-6976

CTOU INC.

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