



## Credit Card Authorization

**Business  
Telecommunication  
Systems, Inc.**

Serving all of your voice and data needs since 1981  
549 BATEMAN CIRCLE • CORONA, CALIFORNIA 92880  
(951) 272-3100 • Fax (951) 493-3033 www.bts1981.com

Please Note Business Telecommunication Systems Charges a 3% Processing Fee

Name of Business: \_\_\_\_\_ Telephone: (\_\_\_\_)-\_\_\_\_\_

Fax: (\_\_\_\_)-\_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Corporation: \_\_\_\_\_ Partnership: \_\_\_\_\_ Sole Owner: \_\_\_\_\_ How Long in Business: \_\_\_\_\_ YRS. \_\_\_\_\_ MOS.

### **First Payment, One Time Fees, or Down Payment:**

I, the undersigned being an authorized signer of the following account, hereby authorize Business Telecommunication Systems, Inc. to charge the credit card below for \$ \_\_\_\_\_

### **Recurring Payments:**

I, the undersigned being an authorized signer of the following account, hereby authorize Business Telecommunication Systems, Inc. to charge the credit card below for \$ \_\_\_\_\_ For \_\_\_\_\_ Months

### **To be kept on File for Future Purchases / Charges:**

I, the undersigned being an authorized signer of the following account, hereby authorize Business Telecommunication Systems, Inc. to charge the credit card below for all future purchase or maintenance renewals as may be invoiced from time to time. I understand that I can always request to cancel this authorization on-file by providing written request via email (2) weeks prior to the effective date of this cancelation.

I \_\_\_\_\_ ON BEHALF \_\_\_\_\_  
(Company Representative) (Company Name)

Authorize Charges to be billed to the credit card account below for future services rendered by: Business Telecommunication Systems, Inc.

MASTERCARD

VISA

DISCOVER

AMERICAN EXPRESS

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code (CVV): \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Billing Address on the Card: Same as above

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Authorized By

Date

Printed Name

Title