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## CREDIT CARD AUTHORIZATION FORM

I hereby authorize Weinstein & Holtzman, LLC. to charge my card for the amount below. I am attaching a copy of my driver license or other government issued ID:

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Address \_\_\_\_\_

Apt No \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Amount \_\_\_\_\_

Credit Card Type    VISA    MASTERCARD    DISCOVER    AMEX

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

Expiration \_\_\_\_\_

CVV/CCV2 \_\_\_\_\_ (security code)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE FAX OR EMAIL BACK TO THE  
REQUESTOR**