



CREDIT CARD AUTHORIZATION FORM

Name on card: _____

Card number: _____

Expiration date: ____/____ **CVV code:** _____

Address (with postal/ zip code): _____

Amount: _____ **CAD / USD (circle the correct currency)**

Instructions: _____

Abacus Brands does not keep your card information on file, respecting all compliance regulations.

Please reference the invoice number in the payment instructions. Thank you!