

# ALTERNATE ADDRESS CREDIT CARD AUTHORIZATION FORM

IN ORDER FOR LMPERFORMANCE TO SHIP YOUR ORDER TO AN ADDRESS OTHER THEN YOUR BILLING ADDRESS WE ARE REQUIRED TO OBTAIN THIS INFORMATION FOR YOUR CREDIT CARD COMPANY.

I, \_\_\_\_\_, AS THE CURRENT ACCOUNT HOLDER, AUTHORIZE **LMPERFORMANCE INC.**,

TO CHARGE MY CREDIT CARD FOR ORDER # \_\_\_\_\_ IN THE AMOUNT OF \$ \_\_\_\_\_

TYPE OF CREDIT CARD:  VISA  MASTERCARD  AMERICAN EXPRESS  DISCOVER

NAME AS IT APPEARS ON THE CREDIT CARD: \_\_\_\_\_

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_ / \_\_\_\_

CVV CODE (SECURITY CODE): \_\_\_\_\_

*Last 3 digits on the back of the credit card where you sign your name for Visa & MC. 4 digits above the last numbers on the front of your credit card for Amex.*

CUSTOMER SERVICE PHONE NUMBER: \_\_\_\_\_

*Found on the back of the credit card.*

## CREDIT CARD BILLING / MAILING ADDRESS

## REQUESTED SHIPPING ADDRESS

CUSTOMER NAME \_\_\_\_\_

CUSTOMER NAME \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

TELEPHONE # ON ACCOUNT WITH CREDIT CARD COMPANY ( \_\_\_\_\_ ) \_\_\_\_\_ -- \_\_\_\_\_

AS THE CREDIT CARD ACCOUNT HOLDER, I HEREBY AUTHORIZE **LMPERFORMANCE** TO SHIP MY ORDER TO THE ALTERNATE SHIPPING ADDRESS LISTED ABOVE.

**CARDHOLDER'S SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_/\_\_\_\_/\_\_\_\_

**AFTER COMPLETING THIS FORM YOU MAY EMAIL THIS FORM TO SALES@LMPERFORMANCE.COM OR FAX TO 850-654-7010**