



CREDIT CARD AUTHORIZATION FORM

I authorize Mengtor Inc. to charge the credit card as follows:

Frequency: One Time: _____ Recurring: _____

Amount to be charged \$ _____ Order# (s): _____

Visa _____ MasterCard _____ Discover _____ AMEX _____

Credit Card#: _____

Expiration Date: _____ / _____

CVV: _____

Name of Card Holder: _____

Billing Address: _____

Phone#: _____

Account E-mail Address: _____

Please sign and email back to Mengtor Inc. at info@mengtor.com .
Please contact: (888) – 683 – 7306 for assistance. Thank you for your business.

Signature Date

Print Name