

CREDIT CARD AUTHORIZATION

I hereby authorize **PREFERRED COMPUTER SYSTEMS** to charge this credit card for the purchase of _____. I agree to pay for this purchase, and agree that this authorization will stay in full force and effect until payment is received in full by **PREFERRED COMPUTER SYSTEMS**.

DATE: _____

CREDIT CARD# _____ **EXP DATE:** _____

SECURITY CODE _____ **A 3 OR 4 DIGIT NUMBER ON FRONT OR BACK OF CARD.**

NAME AS IT APPEARS ON CARD _____

COMPANY (if applicable) _____

CREDIT CARD BILLING ADDRESS _____

SIGNATURE OF CARD HOLDER

If this authorization is for the purchase of an Osprey or Digital Rapids product, please be aware that there is a 25% restocking fee for any returned product. Osprey or Digital Rapids products may not be returned after 30 days.

***** PREFERRED COMPUTER SYSTEMS REQUIRES A FAXED COPY OF THE ACTUAL CREDIT CARD TO BE SENT WITH THIS SIGNED DOCUMENT. *** ONCE FILLED OUT, FAX TO 972-644-4911.**