



1st Class Moving Storage, Inc.

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AUTHORIZATION FOR A ONE-TIME CREDIT CARD CHARGE

TO WHOM IT MAY CONCERN:

I, _____, HEREBY AUTHORIZE 1ST CLASS
(Please Print Name)
MOVING STORAGE TO CHARGE MY CREDIT CARD SHOWN BELOW:

NAME AS IT APPEARS ON CARD: _____

CREDIT CARD NO.: _____

EXPIRATION DATE (mm/yy): ____/____, Security Code (On Back Except Amex on Front) _____

BILLING ADDRESS: _____

ONE-TIME AMOUNT TO BE CHARGED: \$ _____

TYPE OF PRODUCT OR SERVICE (*Please circle One*): _____

SHIPPER: _____ JOB NO.: _____

SIGNATURE OF CARD HOLDER: _____

DATE: _____

Please fill out completely (All information listed is required) and then email or fax back along with a copy of the Credit Card ASAP.

Your information is safe with us. Please read our Privacy Policy for more details