



GEM PAVERS ORDER #

**CREDIT CARD AUTHORIZATION**

DATE: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

CONTACT PHONE #: \_\_\_\_\_

CARD # \_\_\_\_\_

CARD TYPE \_\_\_\_\_

EXP DATE: \_\_\_\_\_

CVV CODE: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

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

DL: \_\_\_\_\_

AMOUNT \$ \_\_\_\_\_

PICTURE ID

I authorize Gem Paver Systems Inc ® of Medley, FL to charge the credit card listed above for payment.

SIGNATURE \_\_\_\_\_

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