For Office Use Only:	
Verified By:	
Date:	

11 Old Houlton Rd Richmond Settlement, NB P: (506)325-2020 F: (506)328-4664

Card holder signature:



Accounting Office 621 Regent St Fredericton, NB P: (506)459-7200 F: (506)459-0066

Credit Card Authorization and Verification Form		
Please accept this letter as authorizati	on to bill my credit card for the following length of time:	
Until further notice		
For this order only. Order (Note: we will request this info	number ormation for all orders even if using this card again)	
Name of card holder (exactly as it	appears on card):	
Credit Card Number	Card Type	
Expiry Date MM/YY	CVV Code (on the back of card in signature field):	
Name of Institution (Bank, Credit L	Jnion, etc.)	
Billing Address (Complete address	, exactly as it appears on credit card billing statements):	
Street Address/PO Box -		
City, Province/ State	Postal/ Zip Code	
Telephone Number:	Fax Number:	
the importation/exportation of go 2.8% will be applied to these transsecured, Beaver Brokerage Inc. will be cancelled once the goods have in writing of any change of addre	to use my credit card for all duties, taxes, fees and other charges as ods into/from Canada for the period of time indicated above. A minimactions. I acknowledge that should I cancel this agreement after my of refund the full deposit less a 5% penalty. I acknowledge that this agree been imported/exported into/from Canada. Beaver Brokerage Inc. iss, credit card number, or expiry date. Any problems that are encourancellation of the standing order without notice.	mum bond fee of deposit has been reement cannot must be notified

Thank you for helping us control credit card fraud.

"Clear it with Beaver"

Date:

MM/DD/YY