



Credit Card Authorization Agreement

Thank you for your Business. In order to accept credit cards, the following agreement must be signed and secure faxed to AIM Services, Inc. Sales at: 866-829-1010, or Support at: 866-829-5818 as your approval to our charges from AIM.

Please complete Section A and Section B. . If you have any questions, please contact us at: 1-800-275-1353.

SECTION A: Required Purchaser / Ship To: Information

Business Name: _____

Contact Name: _____ Email: _____

Street Address: _____

City, State, Zip: _____

Phone #: _____ Fax#: _____

SECTION B: Required Purchaser Credit Card Authorization Information

Check one: VISA  MasterCard  AMEX  Discover 

One-time payment authorization for: _____

Recurring service payment—Begin date: _____ End Date: _____

For any subsequent purchases of product or services placed by customer and invoiced by AIM Services, Inc..

Credit Card #: _____

Expiration Date: _____ Card Code : _____ (Amex- 4 digit on front / Visa, MC, Dis- 3 digit on back)

Cardholder Name (as it appears on the credit card): _____

Billing Address: _____

City, State, Zip: _____

I hereby authorize AIM SERVICES, INC. to bill the credit card listed above for products and services purchased from AIM. I agree to pay the according to the terms and conditions of the card issuer agreement.

Signature _____

Date _____

REQUIRED

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