



Phone: (518) 462-0697
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981 Broadway, Albany, NY 12207

Credit Card Transaction Form

Card Type: _____ MasterCard _____ Visa

Credit Card # _____ Expiration Date _____

Security Code _____ (Three to four digits; usually found in the signature block on the back of the card)

Date Authorized _____

Amount _____

Notice to Credit Cardholder — Please read before Signing:

As the credit cardholder I agree that my signature on this form constitutes my “signature on file” and becomes my agreement to pay all charges as indicated above. Any claim for damaged or lost items cannot be considered as part of the credit card transaction and should be filed directly with Don’s Moving & Storage, Inc. for resolution.

Cardholder’s Name (Printed) _____

Cardholder’s Signature _____ Date _____

Cardholder’s Billing Address _____
