

CREDIT CARD AUTHORIZATION FORM

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN TO US.

All information provided is subject to the privacy policy found at www.kismetjewelsnyc.com

ACCOUNT NUMBER:

COMPANY NAME:

COMPANY ADDRESS:

PLEASE CHECK ONE

☐ Update Information ☐ First Time Authorization ☐ Cancel Authorization

CREDIT CARD INFORMATION

CARDHOLDER NAME:

CREDIT CARD BILLING ADDRESS:

Credit Card Type: ☐ Visa ☐ Mastercard ☐ Discover ☐ AMEX

Credit Card Number:

Expiration Date: Month Year

I authorize KISMET JEWELS NYC to charge the credit card provided herein for;

☐ Current and future invoices and statements ☐ Use only one time

*** CARDHOLDER ***

Print Name, Sign and Date Below

SIGNED:

DATED:

NAME:

"Each party agrees that the electronic signatures of the parties included in this Agreement are intended to authenticate this writing and have the same force and effect as manual signatures. Electronic signature means any electronic sound, symbol or process attached to or logically associated with a record and executed and adopted by the party with the intent to sign such record, including facsimile or e-mail electronic signatures."

This authorization can be cancelled at anytime by executing this form and checking "Update Information" if your further information has changed or "Cancel Authorization" and emailing back to the address provided above or mailing it to the KISMET JEWELS NYC, 37 W 47th St, Ste 803A New York, NY 10036

Credit card companies do have variable transaction charge percentages that may be reflected to your account.