	CREDIT CARD CHARGE AUTHORIZATION TECHNICAL SUPPORT
	Your Business. Our drive.
4880 venture dr. ste 500 • Ann Arbe	IR, MI 48108 • Tel: 734.913.8080 • Fax: 734.913.8088 • www.xitron.com

Customer Number:	Phone:	Fax:
Company Name:		
Name on credit card:		
Credit Card Billing Address:		
City, State/Providence		
Country		ZIP/Postal Code
I,	,	authorize Xitron LLC to charge my credit card
in the amount of \$ <u>\$475</u> reinstallation.	to apply to techni	ical support for a specific support issue or software
<ul> <li>VISA</li> <li>MasterCard</li> <li>American Express – (Any returns agained to be addressed on the second of the second on the second of the second o</li></ul>	nst American Express charges are sub	oject to 3% bank fee charge in addition to applicable restocking charges)
Credit Card Number		Expiration Date
Authorized Signature of Credit Card Holder		Date
CCV code – 3-digit code on the back of your card or on the front of your American Express	4-digit Code	
FAX BACK COMPLETED	) FORM TO EDUCAT	IONAL SERVICES & SUPPORT @ 734-913-8088

FMR-0004 (2/10)