

R.A.K.L. ENTERPRISE, INC.  
D/B/A **RAY'S AUTO REPAIR**  
105 East Ann Street P O Box 988  
Milford, PA 18337  
(570) 296-8615 FAX (570) 296-4835  
Karin (570) 296-2156 (Phone & Fax)

## AUTHORIZATION TO CHARGE CREDIT CARD

DATE: \_\_\_\_\_ INVOICE NUMBER: \_\_\_\_\_

OWNER OF VEHICLE: \_\_\_\_\_

VEHICLE: \_\_\_\_\_

INVOICE AMOUNT:\$ \_\_\_\_\_

NAME ON CREDIT CARD: \_\_\_\_\_

CREDIT CARD #: \_\_\_\_\_ EXP: \_\_\_\_\_

ZIP CODE TO BILLING ADDRESS ON CREDIT CARD: \_\_\_\_\_

I hereby authorize Ray's Auto Repair to charge my credit card for the above referenced invoice number in the amount of \_\_\_\_\_.

**X** \_\_\_\_\_

VEHICLE/CREDIT CARD HOLDER SIGNATURE

\_\_\_\_\_

DATE