



CREDIT / DEBIT CARD AUTHORIZATION FORM:

Please complete the following form and send it via *fax*: **1-661-257-4737** or *email*: authorizations@sonicelectronix.com

We are requesting additional documents of identification to prevent the unauthorized use of your card. This document will be solely used to verify your identity and confirm your order. It will be safeguarded to prevent identity theft.

As a security measure, you may leave the first 12 digits of your card number and driver's license number undisclosed.

Instructions:

1. Print this form. **2.** Place card and ID on boxes below **3.** Photocopy form. **4.** Fill out all blank spaces and sign to authorize the charges to your card **4.** Send signed form via *fax*: **1-661-257-4737** or *email*: authorizations@sonicelectronix.com

PLACE CARD COPY HERE	COPY OF STATE DRIVER'S LICENSE OR IDENTIFICATION CARD WITH YOUR SIGNATURE (PASSPORT OK)
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Order Number(s)		Total Amount	
Written Amount			
Item(s) Purchased			
Card Number		Expiration Date	
Check Card Type	<input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER		

I would like to have the package delivered to the following address

Delivery Address Type	<input type="checkbox"/> Residential <or> <input type="checkbox"/> Business - Company Name:		
Street Address		Suite / Apt	
City		State / Province	
Country		Phone Number	

Agreement

By signing this document, I hereby agree to pay the total amount as entered above according to the card issuer agreement and approve to deliver to the destination specified. I authorize Sonic Electronix, Inc., also known as SE Inc. to charge the above credit card for this amount. I agree to be bound to Sonic Electronix Site's Terms of Use as well as their Warranty and Return Policies for this transaction and any future ones, committed to follow and respect any instructions and procedures for the return of any merchandise. I also agree that I, the buyer, am responsible for any cancellation, restocking or shipping fees in the event the transaction is cancelled or the merchandise is returned or refused. Furthermore, I understand that the delivery of some merchandise may require someone's presence at the destination of delivery for signature acknowledgment and it shall be my responsibility to comply with such requirement.

I authorize any future purchases to Sonic Electronix made with this card
 (Check box if you are planning to make future orders– recommended for wholesalers)

As a wholeseller, I authorize the following company's employee(s) for pick-ups (up to 2 different people allowed)

Name(s): _____ *Valid ID will be provided*

I certify that all information presented in this form is legitimate and understand that Sonic Electronix reserves the right to verify all information given with the card issuer and may or may not allow delivery of my order(s)

Authorized Card Signature	
Complete Name	
Title	Date