



Credit Card authorization - All Field required

The credit card holder (name on card), authorize "4Net Networking Corp." located at 6535 NW 84TH AVE. Suite A, MIAMI, FL 33166, USA, to charge my credit card for this and future purchases verbally (or written) approved by me. Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. 4Net Networking Corp. will keep all information entered on this form strictly confidential. The credit card holder recognize this transaction as legit and agreed with our terms and conditions of sale.

Credit information

VISA Mastercard Discovery AMEX

Name on card: _____

Credit Card number: _____

Expiration date: ____/____/____ CVS/CVV2: _____

Billing address – Street: _____

City: _____ State: ____ ZIP: _____

Country: _____

Delivery authorization

The shipment / delivery will be to care of the following person / freight company ***(required)**. 4Net Networking Corp. will NOT be liable for any damages, loss, Customs fees/duties/taxes, or any other problems once it is delivered to the cargo/ carrier company:

Authorized users: _____

Shipping company: _____

Contact: _____ Tel: (____) _____ Email: _____



_____ Date: ____/____/____

Signature of Card Holder. (Same as on the credit Card.) **Tel/Cell:** _____

Documents copy required



Send copy of CREDIT CARD FRONT AND BACK, CARD HOLDER PERSONAL IDENTIFICATION OR PASSPORT