

## RAKTEL- Automatic Recharge CREDIT CARD BILLING AUTHORIZATION FORM

Credit Card Billing Information	
<b>Credit Card Number</b>	
<b>Payment Type</b>	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex <input type="checkbox"/> Discover <input type="checkbox"/> Other, Please Specify
<b>Expiration Date</b>	
CSC MasterCard, Visa and Discover: last three digits on the back of your card. Amex: four digits on the front of the card.	
<b>First Name</b>	
<b>Last Name</b>	
<b>Billing Address Line</b>	
<b>City</b>	
<b>State</b>	
<b>ZIP Code</b>	
<b>Billing Phone</b>	
<b>Email</b>	
Contact Phone (if different then Billing Phone)	
Amount To <b>Refill</b>	
<b>RAKTEL Account Number</b>	
Customer agrees that all information is complete and accurate. Customer also agrees that RAKTEL will charge (above) credit card when customers account's balance reaches \$5. Disputes to amounts invoiced should immediately be reported to <a href="mailto:payment@raktel.com">payment@raktel.com</a> . Changes in the status of this card should be reported to <a href="mailto:payment@raktel.com">payment@raktel.com</a> or fax number on this form.	

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_