



# SUBSCRIPTION RENEWALS & PRODUCT PURCHASES

Providing Property Management Solutions for Over 25 Years

## CREDIT CARD AUTHORIZATION FOR SUBSCRIPTIONS RENEWALS & PRODUCT PURCHASES

| Internal Use Only |
|-------------------|
| Invoice # _____   |
| Auth # _____      |

Today's Date: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

I authorize the amount of \$\_\_\_\_\_ to be charged to my credit card  
(plus sales tax where applicable)

For: \_\_\_\_\_

By signing below I understand and acknowledge payment in full to be made when billed. I understand that all purchases are **non-refundable** and therefore waive my right to dispute these charges.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Options for returning this form:** (1) Fill in ALL information requested and **fax to 703-255-9172** or (2) Fill in ALL info above and add **ONLY** (to protect your identity) the last four digits of the credit card to be charged below and **email to support@promas.com**. Someone from PROMAS will call you for the rest of the information needed.

|   |
|---|
| <b>Credit Card and Billing Information</b>  |
| Card Number: _____ - _____ - _____ - _____  |
| Verification: _____ Expiration Date: _____ / _____<br>(Visa/MasterCard/Discover: 3 digit code on back; AMEX: 4 digit code on front) |
| Cardholder NAME as it appears on the card: _____  |
| Billing Street Address: _____   |
| City: _____ State: _____ Zip Code: _____  |