



108 E. 27th Street
Jacksonville, FL 32206
Phone: 904-353-1500
Fax: 904-353-2777

Credit Card Authorization

I, _____, authorize Thompson Electric, Inc,

to bill my _____ credit card # _____

that expires _____ of 20____. Credit card billing address:

_____ Zip code: _____

not to exceed \$ _____ for electrical services performed at the following address:

Please include a copy of the front and back of your credit card.

Thank you,

Jessica Allsbrook
Administrative Assistant

Signature: _____

Date: _____