

Faith Naluai Realty, LLC

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Credit Card Payment Authorization Form

Please sign and complete this form to authorize FAITH NALUAI, LLC to make a debit to your credit card listed below. By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This permission does not provide authorization for any additional unrelated debits or credits to your account.

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l,	, au	ıthorize FAITH NALUAI, L	LC to charge my o	credit card account indicated
(Full Name)				
below for	on or after			
	(Amount)			(Date)
This payment is for				
	1)	Description of Goods/Ser	vices)	
Billing Address	Phone			
City, State, Zip	E-mail			
Account Type (please circle):	Visa	MasterCard	AMEX	Discover
Cardholder Name	Account Number			
Expiration Date	CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX)			
SIGNATURE		DATE	-	

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company, so long as the transaction corresponds to the terms indicated in this form.

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