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### CREDIT CARD AUTHORIZATION FORM

I, \_\_\_\_\_ Representing Company Name: \_\_\_\_\_

Authorize CoTa Global to charge my credit card # \_\_\_\_\_

Expiration Date: \_\_\_\_\_ V – Code: \_\_\_\_\_

The Amount of \$ \_\_\_\_\_ \* (USD) Plus Shipping  OR Including Shipping  (Select one)

For Sale Order #: \_\_\_\_\_

**\*I understand and authorize the amount to be adjusted down for missing items that are out of stock and not being shipped.**

I need and authorize CoTa Global to charge my card in the following breakdown of charges for the total amount listed above:

Charge I: \$ \_\_\_\_\_ Charge II: \$ \_\_\_\_\_ Charge III: \$ \_\_\_\_\_

Merchandise: Received OR will be shipped (circle one)

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

State / Zip Code /Country: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax: \_\_\_\_\_

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

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

By signing this form, I hereby acknowledge that I have read and agree to the "CoTa Global Sales Policy" and Terms. I declare that all the information in this order form is true, correct and complete. I authorize CoTa Global. to charge my account for this order placed by me or any other authorized buyer for the goods plus incurred shipping charges. I understand that in the case of a disputed charge I will be responsible for all the fees and collection costs. CoTa Global. reserves the right to sue within the Jurisdiction of the Los Angeles County Court of Law in California. This is regardless of where this contract was signed or where their business or residence is located.

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

Attn: Credit Department Fax (818)991-9294