

## **Credit Card Using Authorization**

## Neo Cube Inc D/B/A Winner Wireless

11528 Harry Hines Blvd #C301 Dallas, TX 75229

Company Name:				
Card Holder Name:				
Card Type:				
Card Number:				
Card Expiration Date:				
Billing Address:				
City:	State:		Zip Code:	
3 Digits AVS-Cod:	Telephone:			
Signature:		Date:		

**Notes**: Please fax the filled form to 972-243-6851. Please don't send the filled form by email. Attach Copy of front and back of Credit Card and Valid ID

**Terms and Conditions:** By signing this credit card authorization form, the cardholder authorizes NeoCube Inc DBA Winner Wireless to debit the credit card for the amount of the products/ goods ordered or received plus shipping charges Customer accepts full financial responsibility after product has been shipped. Customer guarantees that no- chargebacks will be issued, and will contact NeoCube Inc to settle any disputes.