

# MY ARMOR SERVICES, INC.

TX DPS PRIVATE SECURITY BUREAU LICENSE #C20189  
12680 West Lake Houston Pkwy; Suite 510, Houston, TX 77044  
1-800-341-0919

[WWW.MyArmorServices.COM](http://WWW.MyArmorServices.COM)

## One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize **My Armor Services, Inc.** to make a one time debit to your credit card listed below.

By signing this form you give **My Armor Services, Inc.** permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

---

### Please complete the information below:

I \_\_\_\_\_ authorize **My Armor Services, Inc.** to charge my credit card.  
(full name)

account indicated below for \$ \_\_\_\_\_ on or after \_\_\_\_\_.  
(amount) (date)

This payment is for \_\_\_\_\_.  
(description of goods/services)

Billing Address \_\_\_\_\_ Phone# \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Email \_\_\_\_\_

Account Type:  Visa  MasterCard  AMEX  Discover

Cardholder Name \_\_\_\_\_

Account Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

3-Digit CVV Code: \_\_\_\_\_ (found on back of credit card)

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I authorize My Armor Services, Inc. to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. 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.