



KING OF KASH



CREDIT CARD CHARGE AUTHORIZATION CHANGE FORM



SECTION A – CUSTOMER INFORMATION

Name (Last, First, MI)

Address

City

State

Zip

Social Security
Number

Telephone
Number

SECTION B – NEW CHARGE CARD INFORMATION

Credit Card
Number

Expiration
Date

SECTION C – CHANGE AUTHORIZATION

By signing the Credit Card Charge Authorization Change Form you are giving KING OF KASH permission to charge your credit card for all items refused by your financial institution including but not limited to returned item fees. KING OF KASH will NOT charge your credit card for any other reasons except those transactions requested by you.

Customer's Signature

Date

X

X