



PHONE: 1-800-374-8018

FAX: 1-706-261-0860

CREDIT CARD AUTHORIZATION

PLEASE PRINT

I, _____, authorize Furniture Rentals, Inc. to charge
\$ _____ to my credit/debit card, and as selected below.

VISA MASTER CARD AMERICAN EXPRESS DISCOVER CARD

Please charge my credit/debit card for initial payment ONLY.

Please charge my credit/debit card for the initial payment; AND, I also authorize Furniture Rentals, Inc. to MONTHLY bill my credit/debit card for all future payments.

NOTE: Future payment charges will ALWAYS post on credit cards the 27th day of each month.

Credit Card No.: _____ Exp. Date: ____/____

Name on Card: _____ Security Code: _____

Card Zip Code: _____ Signature: _____

*By signing and returning this form, you authorize Furniture Rentals, Inc. to charge the above card in the amount indicated above. Please notify Furniture Rentals immediately if you have an account number change.

Please attach a readable photocopy of your Driver's License as well.