

B & R Mini Storage

615 7th Ave.

Longview, WA 98632

360-577-1110

Fax 360-577-1585

Credit Card Authorization

I _____ authorize that monthly storage fees can be paid with the following card number on the _____ day of the month at the charge of \$_____.____ for unit(s) _____.

Card Holder's Name: _____

Card #: _____

Expiration: ____/____

CVV (Last 3-digit # by card signature): _____

Billing Address: _____

Billing Zip Code: _____

Signature

Date