



Contact Us:  
**Pack-It (Qld) Pty Ltd trading as Le Pack**  
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## CREDIT CARD PAYMENT AUTHORISATION

CLIENT: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Invoice Number: \_\_\_\_\_

Authorised Amount: \$ \_\_\_\_\_

Card Type: Visa / Mastercard / Bankcard

Card Number

Expiry   /   CCV

Cardholders Signature: \_\_\_\_\_

<b><u>OFFICE USE ONLY:</u></b>			
Processed -	Transaction No _____	Date: _____	Initial: _____
Received -	Receipt No _____	Date: _____	Initial: _____