



CREDIT CARD FORM

Please, read and complete all the following information.

I \_\_\_\_\_ hereby authorize Asociación Puertorriqueña del Concreto to charge my credit card for the following amount: \$ \_\_\_\_\_

VISA \_\_\_\_\_ MC \_\_\_\_\_ AMEX \_\_\_\_\_

Credit Card Account : \_\_\_\_\_

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

Security Code : \_\_\_\_\_

Card Holders Name : \_\_\_\_\_ Please Print

Address \_\_\_\_\_

City State Zip Code

Phone : ( \_\_\_\_\_ ) \_\_\_\_\_ Mobile number with text capability, where receipt will be sent.

E-mail : \_\_\_\_\_

In the event that this credit card cannot be processed, an alternate payment method will be provided.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY
Concept : \_\_\_\_\_
Approval Code : \_\_\_\_\_ Date : \_\_\_\_\_

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