



# Papio Valley Nursery, Inc.

PO Box 461063  
Papillion, NE 68046-1063

## Credit Card Authorization

Please complete this credit card authorization form if you wish to pay by credit card and mail or fax to:  
Papio Valley Nursery, Inc., P.O. Box 461063, Papillion, NE 68046-1063. Fax number: 402-505-3421

Company Name: \_\_\_\_\_

### Please charge my:

Visa       Master Card       Discover Card       American Express

Name as it appears on card:

CVV Code:

\_\_\_\_\_

\_\_\_\_\_

Card Number:

Expiration Date:

\_\_\_\_\_

\_\_\_\_\_

Billing Address on Credit Card Statement:

Payment Amount:

\_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please keep my credit card number on file:    Yes       No

Charge:    After each invoice       Weekly       Monthly

Special Instructions:

Signature:

Date:

\_\_\_\_\_

\_\_\_\_\_