



800-321-1987

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Fax: 818-501-5785

www.QuikStor.com
accounting@QuikStor.com

6345 Balboa Blvd., Ste 150, Building 3
Encino, CA 91316

Electronic Payment Authorization Form

Visa and MasterCard or ACH ONLY

We do not accept American Express

**Please write legibly and scan/e-mail to accounting@quikstor.com
or fax to (818) 501-5785**

Facility Name: _____

Facility Address: _____

Billing Name: _____

Billing Address: _____

CREDIT CARD : Visa/MasterCard #: _____

Expiration Date: ____/____ CVV: _____

****Credit Card Payments over \$500 will be charged an additional 2% Convenience Fee****

ACH : Routing #: _____ Bank Acct # : _____

I authorize QuikStor to charge \$ _____ as a One-time charge.

I authorize QuikStor to charge \$ _____ as a Recurring monthly charge.

Signature: _____ Date: _____

Special Notes: