



I, _____, hereby authorize Pac-J Services Home Care & Staffing to charge my credit card. I understand that the amount charged to my credit card will be reflected on my credit card statement. The amount charged is based on services requested by me and prices stated by Pac-J Services, LLC.

Please select one:

- VISA
 Master Card

Card number:

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Expiration Date: _____

Billing address: _____

For services rendered to: _____

Card holder signature: _____ Date: _____