



## **Credit Card Authorization Form**

I, \_\_\_\_\_, authorize **Anadolu Patent Danışmanlık Bilişim ve Ticaret A.Ş. (Anadolu Patent AS)** to process the following charges against the credit card indicated.

Card Type : \_\_\_\_\_

Name on card : \_\_\_\_\_

Card Number : \_\_\_\_\_

Expiry Date (mm/yy) : \_\_\_\_\_

CVV Security No : \_\_\_\_\_

Amount Authorized (₺TL)\* : \_\_\_\_\_

Invoice Numbers : \_\_\_\_\_

Email Address : \_\_\_\_\_

I accept that the above information given is correct.

**Anadolu Patent Danışmanlık Bilişim ve Ticaret A.Ş. (Anadolu Patent AS)** is authorized to withdraw the written amount in this form. In case of an objection by the credit card holder, I undertake to compensate all damages Anadolu Patent Danışmanlık Bilişim ve Ticaret A.Ş. (Anadolu Patent AS) may be subjected to without a need for a prior notification or a court order. Otherwise, I hereby declare, admit and undertake all legal responsibility to be born upon me in case of any legal action.

Date (dd/mm/yyyy): \_\_\_\_\_

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

*\*Please specify if you are quoting any currency other than Turkish Lira. Your card will be charged with the TL equivalent.*

*\*Please be informed that a 2% surcharge of bank commission will be applied to the Amount Authorized.*

*\*We do not record your credit card information in our company database, before or during the transaction.*

*\*Please forward this form by email to [bilgi@anadolupatent.com.tr](mailto:bilgi@anadolupatent.com.tr) or [accounting@anadolupatent.com.tr](mailto:accounting@anadolupatent.com.tr)*