



CREDIT CARDHOLDER INFORMATION					
NAME ON CARD					
TYPE OF CREDIT CARD	VISA	MC	AMEX	DISCOVER	OTHER
TYPE OF ACCOUNT	PERSONAL		BUSINESS		
CREDIT CARD #					
EXP DATE					
CVV (3 digits in the back, 4 in the front if AMEX)					
BILLING ADDRESS	Billing Zip Code:				
AUTHORIZED USER OF CREDIT CARD					
NAME					
COMPANY					
PHONE NUMBER					
EMAIL ADDRESS					
IDENTIFICATION					
RELATION TO OWNER					
TYPE OF CHARGES					
AUTHORIZED AMOUNT	\$				
DATES OF CHARGES					

AUTHORIZATION OF CARD USE
<p>I certify that I am the authorized holder and signer of the credit card referenced above.</p> <p>I hereby authorize collection of payment for all charges as indicated above. Charges may not exceed the amount listed above in the "AUTHORIZED AMOUNT" field. I understand this is only for up to this amount during the time period of "DATES OF CHARGES" referenced above. If additional charges are going to be authorized a new form will have to be completed. By signing this for I understand the charges and approve them.</p> <p>PLEASE PROVIDE A PHOTO COPY OF YOUR DRIVERS LICENSE ALONG WITH A PHOTO COPY OF THE CREDIT CARD BEING USED FOR THIS TRANSACTION. WE APPRECIATE YOUR BUSINESS.</p>

CARDHOLDER NAME			
SIGNATURE		DATE	