

# CREDIT CARD AUTHORIZATION

| CREDIT CARDHOLDER INFORMATION |          |    |      |          |       |
|-------------------------------|----------|----|------|----------|-------|
| NAME ON CREDIT CARD           |          |    |      |          |       |
| TYPE OF CREDIT CARD           | VISA     | MC | AMEX |          | OTHER |
| TYPE OF ACCOUNT               | PERSONAL |    |      | BUSINESS |       |
| COMPANY NAME                  |          |    |      |          |       |

|                 |  |       |  |            |  |
|-----------------|--|-------|--|------------|--|
| ACCOUNT NUMBER  |  |       |  |            |  |
| EXPIRATION DATE |  |       |  |            |  |
| BILLING ADDRESS |  |       |  |            |  |
| CITY            |  | STATE |  | ZIP CODE   |  |
| PHONE           |  | EMAIL |  | FAX NUMBER |  |

| 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 certify that all information above is complete and accurate.</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.</p> |

|                 |  |      |  |
|-----------------|--|------|--|
| CARDHOLDER NAME |  |      |  |
| SIGNATURE       |  | DATE |  |