

INFAMOUS PRODUCTIONS CREDIT CARD AUTHORIZATION - 2014

NAME ON CREDIT CARD: _____

BILLING ADDRESS ON CARD: _____

CITY: _____ STATE: _____ ZIPCODE: _____

PHONE: _____ FAX: _____ MOBILE: _____

EMAIL: _____ WEBPAGE: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

CARD NUMBER: _____

EXPIRATION DATE: _____ SECURITY CODE: _____

TYPE OF CARD: _____

CITY: _____ STATE: _____ ZIPCODE: _____

PHONE: _____ FAX: _____ MOBILE: _____

AMOUNT TO CHARGE: _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE _____

DATE _____