

Credit Card Authorization

Today's Date:

First Name:

Last Name:

Business Name:

Business Address:

Street:

Apt #

City State Zip

Cardholders Address:
(If Different)

Street:

Apt #

City State Zip

VISA MC AMEX DISCOVER

Card Number:

Expiration Date:

Code:

Total:

Deposit:

50% Deposit Required. You authorize card for remaining balance upon project completion. Deposit immediately charged to start production. All products custom made to approved specs. Orders final upon approval. No cancellations, returns or refunds.

Signature: _____