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**CREDIT CARD CHARGE AUTHORIZATION**

**INDIVIDUAL/COMPANY NAME:**

\_\_\_\_\_

**CHARGE CARD INFORMATION:**

COMPANY NAME ON CARD \_\_\_\_\_

CARD HOLDER NAME \_\_\_\_\_

CARD BILLING ADDRESS \_\_\_\_\_

CITY STATE ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

AMOUNT TO BE CHARGED (CIRCLE ONE): \$ \_\_\_\_\_

VISA

MASTERCARD

AMERICAN EXPRESS

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CARD # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

I CERTIFY THAT I AM AN AUTHORIZED SIGNER ON THE ABOVE CARD:

SIGNED X \_\_\_\_\_ DATE \_\_\_\_\_

*Your information will be protected and not held on file after purchase has been processed.*