**Authorization for Credit Card Use**

PLEASE COMPLETE THIS AUTHORIZATION AND RETURN.
All information will remain confidential

Name on Card:

Billing Address:

Credit Card Type: \_\_\_\_\_ Visa     \_\_\_\_\_ Mastercard   \_\_\_\_ Discover \_\_\_\_\_ AmEx

Credit Card Number:

Expiration Date:

Card Identification Number: (last 3 digits located on the back of the credit card or 4 digits on front of Amex)

Amount to Charge:  $  (USD)

I authorize to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Please Sign and Date

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return the completed and signed form to the following:**

[www.barkodeprops.com](http://www.barkodeprops.com)