



6415 Karms Park Court, Las Vegas, NV 89118
702.837.9009 (phone) · 702.837.8004 (fax)

Credit Card Authorization Form

Type of Card – Circle One: **VISA** **MASTERCARD** **AMEX** **DISCOVER**

Name as it Appears on Card: _____

Account Number: _____ Expiration Date: _____

Security Code (3 digits on back of the card): _____

Billing Address: _____ Suite #: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

I, _____, hereby authorize Creative Digital Printing, to process the listed credit/debit card for the purpose of advertising payment in the amount(s) as set forth below.

This information is for the express use of payment of advertising, production and/or services by Creative Digital Printing. Creative Digital Printing shall keep all credit/debit related information in the strictest of confidence, and at no time provide, use or reproduce this information for any purpose other than as authorized.

I understand that I will be notified immediately of any decline of charging privileges, and shall be required to make other payment arrangements.

Authorized Signatory: _____ Date: _____

Total Amount Due:

Total To Be Charged:

Schedule: One – Time

Other (specify): _____

Advertiser's Name:

(If different from individual and/or cardholder name)

Received A/R: _____ Date: _____

FAX TO: 702-837-8004