

## **Credit Card Authorization Form**

Please fill out this authorization, scan and return:

| Date:  |   |   |
|--|---|---|
| Company:   |   |   |
| Cardholders Name:  |   |   |
| Card Type (Circle One)   | AMEX / Visa / M   | asterCard   |
| Credit Card Number:  |   |   |
| Exp. Date:   |   |   |
| Security Code (Visa/MC 3   | Digits on back. A   | mex 4 Digits on front)  |
| Billing Address:   |   |   |
| City:  | State:  | Zip:  |
| All Quotes and Invoices are based o<br>used. Cardholder hereby assumes<br>and every cause whatsoever o<br>Cardholder authorizes JR Ligh<br>additional services rendered, l | on a 4% cash or check dis<br>the entire risk of loss, dam<br>commencing with the deli<br>ting Design Inc. to charge<br>late returns, rental extension | ARD the Invoiced Amount.<br>count which will not apply if a credit card is<br>lage, or destruction of Equipment from any<br>very of such equipment to Cardholder.<br>Cardholder's credit card account for<br>ons, and/or replacement of any lost or<br>tion outside the state of Illinois. Applicable sales<br>invoice. |

Signature of Cardholder:

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