



## Credit Card Authorization

Thank you for your order.

In order to process your order, we must have a completed Credit Card Authorization form on file. Please fill out the form in its entirety, print, sign and fax it back to our office at **818-904-0005**

### Credit Card Information

Company \_\_\_\_\_

Type of Card                      Visa                      Master Card                      Amex \_\_\_\_\_

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

CVV / CID Code \_\_\_\_\_

Name on the Card \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

### Authorization

My signature confirms that I am the cardholder or have been authorized by the cardholder to make purchase(s) from Revolt, with the credit card listed above. I understand that a 3% processing fee will be added to the total amount of the invoice. I hereby authorize Revolt Pro Media Inc. to charge this credit card for any current unpaid Invoices.

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Date