

# Credit Card Authorization Form

## Instructions

1. Complete this form by printing legibly with a dark pen.
2. Fill in all billing and shipping information in the blanks below.
3. Sign in the space provided for the Credit Card holder's signature.
4. Fax this form along with a photocopy of your Driver's License to (954) 935-5930

I \_\_\_\_\_, hereby authorize Expose Yourself to charge my Credit Card in the amount of \$ \_\_\_\_\_ (Including shipping and/or taxes if applicable).

Type of Card:  Mastercard  Visa  Discover  AMEX  Deposit \*  Full \$

Credit Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ CVC Code (last 3 digits of the number on the back of the credit card) \_\_\_\_\_

### Billing Address

Address

City

State

Zip Code

Telephone

### Shipping Address

Address

City

State

Zip Code

Telephone

As the credit card holder I hereby authorize Expose Yourself to ship my merchandise to the above address.

C.C. Holder's Signature: \_\_\_\_\_

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

\* If you are giving a deposit, the rest of the balance will be charged to this credit card as soon as your order is ready.

All Sales are final

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud.

All information entered on this form will be kept strictly confidential by Expose Yourself.

**Complete and fax all required documents to (954) 935-5930**

Auth. Code (Mgmt. use only)

Amount due \_\_\_\_\_ Code #



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

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**Vehicle Wraps**