



FORT LEE, NJ
 222 Bridge Plaza South, #580
 Fort Lee, NJ 07024
 T. 201 917 3830 F. 201 917 3831

PALISADES PARK, NJ
 242 Broad Avenue
 Palisades Park, NJ 07650
 T. 201 944 5353

NEW YORK, NY
 16 W 32nd Street, #702
 New York, NY 10001
 T. 212 560 8938 F. 212 273 9739

DULUTH, GA
 3483 Satellite Blvd. Suite 201 South
 Duluth, GA 30096
 T. 404 913 5308

Authorization for Credit Card Use

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

Name on Card: _____

Billing Address: (address) _____
 (state) _____ / (zip) _____

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)

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: _____