

Credit Card Authorization Statement

I, _____, hereby authorize
_____ to charge my credit card as detailed below for payment of
goods/services provided.

Cardholder Information

Cardholder Name: _____
Billing Address: _____
Phone Number: _____
Email Address: _____

Credit Card Information

Credit Card Type: _____ Card Number: _____

Expiration Date (MM/YY): _____ CVV: _____

Authorization Details

Amount Authorized (\$): _____
Description of Goods/Services: _____
Date(s) of Transaction: _____

By signing below, I agree to pay the above amount according to the card issuer agreement.

Cardholder Signature: _____ Date: _____
