

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: _____