



## **CREDIT CARD AUTHORIZATION FORM**

I hereby authorize Sheets DMC and or Sheets to utilize the following credit card for all charges relating to the Services or Other as listed below.

<b>DATE:</b>	<b>PROJECT:</b>
<b>CARD HOLDER NAME:</b>	
<b>CARD NUMBER:</b>	<b>CARD TYPE:</b>
<b>EXPIRATION DATE:</b>	<b>CVV Number (3-4 Digit Security Code):</b>
<b>BILLING ADDRESS:</b>	
<b>CITY, STATE &amp; ZIP:</b>	
<b>TOTAL JOB AMOUNT:</b>	<b>DEPOSIT AMOUNT:</b>
<b>E-MAIL ADDRESS: PHONE NUMBER:</b>	

I, \_\_\_\_\_, authorize "SHEETS" to charge the above credit card for the amount of \$\_\_\_\_\_ and the remaining balance when job is complete.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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