

## CREDIT CARD AUTHORIZATION FORM

Credit Card Billing Information			* Required Fields
*Company Name			
*Name as it appears on Credit Card			
Issuing Bank			
*Credit Card Type	<input type="checkbox"/> American Express	<input type="checkbox"/> Master Card	<input type="checkbox"/> Visa
Corporate Card	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
*Credit Card Number	Enter 0 before AmEx card number		
*Expiration Date			
*CVC Number	Last 3 digits from the back of card or 4 digits from face of card.		
*Billing Address			
City			
State/Province			
*Zip/Postal Code			
Country			
*Phone Number			
Fax Number			
*E-Mail Address: <small>For invoice and receipt copies</small>			

Clear copies of the front and back of the credit card and card holder's driver's license are required.

***I hereby authorize SoCal Productions, Inc., dba SoCal Rentals to charge the credit card above for payment. I take full responsibility for payment and agree that all information provided is accurate and complete. I further understand that until authorization is rescinded, this credit card will be used for payment of all orders for the above-mentioned account.***

<b>Authorized by (print name):</b>			
<b>Authorized Signature:</b>		<b>Date:</b>	

**Fax completed form to (818) 565-3302**