



1557 St. Joseph Ave, Suite 300
East Point, GA 30344
(470)-225-6709

Credit Card Payment Authorization Form

Sign and complete this form to authorize **Central Atlanta Props & Sets, LLC** to make a debit to your credit card listed below.

By signing this form you give us permission to debit your account on or after the indicated date.

Please complete the information below:

I _____ authorize **Central Atlanta Props & Sets, LLC** to charge
(full name)
my credit card on or after _____.
(date)

This payment is for _____.
(description of goods/services)

Invoice amount: _____ (Only if One Time Authorization).

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Please Check One:

- One Time Authorization:** I hereby authorize Central Atlanta Props and Sets, LLC to charge the indicated credit card for any accrued amounts in relation to this invoice.
- Keep Card on File:** I hereby authorize Central Atlanta Props and Sets, LLC to charge indicated card for future invoices.

Account Type: Visa MasterCard AMEX Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV _____

SIGNATURE _____ DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

PLEASE FILL IN ALL REQUESTED INFORMATION BELOW AND ATTACH A COPY OF YOUR CREDIT CARD AND DRIVER'S LICENCE