

NEXT GEN FOTO PIX

**Credit Card Authorization Form**  
**Next Gen Foto Pix**  
**12555 Biscayne Blvd Suite 834**  
**North Miami, Florida 33181**  
**(470) 367-8693**

I \_\_\_\_\_ hereby authorize "Next Gen Foto Pix"  
**Print Cardholder Name**

to charge my \_\_\_ *Visa* \_\_\_ *Mastercard* \_\_\_ *Discover* \_\_\_ *Am Ex*

ACCOUNT NUMBER: \_\_\_\_\_  
**PLEASE DOUBLE-CHECK YOUR NUMBERS**

EXPIRATION DATE: \_\_\_\_\_ (MO/YR)

CVV CODE: \_\_\_\_\_ \* Located on back of card

IN THE AMOUNT OF \$ \_\_\_\_\_

**INVOICE #** and Customer Name (so we know how to apply this payment) \_\_\_\_\_

MY BILLING ADDRESS FOR THIS CARD IS:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone Fax

\_\_\_\_\_  
Cardholder Signature Date

EMAIL ADDRESS FOR COPY OF RECEIPT: \_\_\_\_\_

**Please fax back to**  
**or email to [info@nextgenfotpix.com](mailto:info@nextgenfotpix.com)**