



Office Furniture & Studio Rentals  
 10631 Magnolia Blvd., North Hollywood, CA 91601  
 PH: 818-763-3470 / FX: 818-763-3599

# CREDIT CARD AUTHORIZATION FORM

**COMPANY/CARDHOLDER INFORMATION:**

Company Name: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
 Mailing Address where credit card statement is sent

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

PH: Work: \_\_\_\_\_ Cell: \_\_\_\_\_ Home: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_

**CREDIT CARD INFORMATION:** *(Please Note: A 3.5% processing fee will be applied to all credit card transactions)*

Type of Credit Card: MC  Visa  Amex

Issuing Bank: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

The last 3 numbers located on reverse of credit card  
 (Amex has 4 non embossed numbers on front of card)

**Amount to Charge:** \_\_\_\_\_

Cardholder hereby acknowledges and authorizes charges on the above card in exchange for goods and/or services. Customer agrees to perform the obligations set forth in the Cardholders agreement with the issuer.

\_\_\_\_\_  
**Cardholder's Signature** Date: \_\_\_\_\_

Please Email completed form & required information to Salesperson: \_\_\_\_\_

- Completed Credit Card Authorization Form
- Copy of Card Holder's Driver's License
- Copy of the credit card – front & back
- Certificate of Insurance

Feature / TV / Commercial / Other:

Name of Production Company: \_\_\_\_\_ Job/Show Name: \_\_\_\_\_

**AUTHORIZED BUYERS:**

| Title          | Name: | Phone #: | Email: |
|----------------|-------|----------|--------|
| Set Decorator: |       |          |        |
| Buyer:         |       |          |        |
| Coordinator:   |       |          |        |
| Other:         |       |          |        |