



Jensen's Mail & Copy

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Authorization to Charge Credit Card

Date: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-mail: _____

This serves as my authorization to have charges for:

_____ placed on my credit card. I have included a copy of the front and back of my credit card and my driver's license to verify that I am the holder of this card.

Visa or MasterCard#: _____

Date of Expiration: _____

Security code: _____ (last 3 digits on the back)

Cardholder name: _____ (Printed)

Cardholder signature: _____