



CREDIT CARD AUTHORIZATION

Please fill out this "Credit Card Authorization Form" allowing Intelligent Lighting Creations, Inc. to charge this expense to the credit card listed below. Please return this form to us along with a COPY of your CREDIT CARD and DRIVERS LICENSE.

ONLY CHARGES AUTHORIZED BY THE CARDHOLDER WILL BE CHARGED TO THIS CARD

Credit Card Information

Type of Card: *Personal* *Corporate* Master Card Visa Amex Discover

Amount to be billed: _____ Deposit Amount: _____

Customer Name: _____

Card Number: _____ Expiration Date: _____ CID: _____

Cardholder Name: _____ Cardholder Phone Number(s) _____

Credit Card Bill to Address: _____

Business Phone Number: _____

Authorized Cardholder Signature: _____ Date: _____

Authorized Users: _____

PLEASE NOTE: A 4% Surcharge will be added to all credit card purchases placed via phone, e-mail or any other off-site means.

FOR OFFICE USE ONLY

CONTRACT # _____ INVOICE# _____

Transaction Type: Purchase Rental Deposit Rental and Rental Deposit

Authorization # _____ REF # _____

Total Amount Charged: \$ _____ Capture Code: _____

Submitted By: _____