



CREDIT CARD AUTHORIZATION FORM

This letter is to authorize **Doral Digital Reprographics, Corp.** to use the following credit card as per the instructions note:

Company Name: _____

Phone: _____ Fax: _____

Cardholder Name: _____

Billing Address: _____

Card Type: _____ (MC) Master Card, (VS) Visa, (AX) American Express, (DS) Discover

Card Number : _____ Expiration: _____

Security Code: _____

PO# or INVOICE(S) #: _____

Dollar Amount authorized: \$ _____ (ONLY)

Authorized Signature: _____
