

# FreeportPress<sup>®</sup> Credit Card Authorization Agreement

I authorize The Freeport Press, Inc. to charge my credit card for payment of their products and/or services. If The Freeport Press, Inc. is unable to process my payment I will be responsible for an alternate payment arrangement and any resulting processing fees.

**Check One:**



This authority is to remain in full force and effect until Freeport Press Inc. has received written notification via certified mail from me of its termination in such time and manner as to afford Freeport Press Inc. a reasonable opportunity to act on it.

This authority is for a onetime charge according to the information provided below.  
Payment for Freeport Press Inc. invoice(s):

<b>Invoice Number</b>	<b>Amount \$</b>
<b>Invoice Number</b>	<b>Amount \$</b>
<b>Invoice Number</b>	<b>Amount \$</b>
<b>Invoice Number</b>	<b>Amount \$</b>
	<b>Service Charge \$</b>
	<b>Total Charge \$</b>

**Billing Information** – Please enter the following information exactly as it appears on your statement

**Name as it appears on card:**

**Check one:**  visa  master card  AMEX  discover

**Credit Card #:** \_\_\_\_\_ **Expiration Date (mm/yy)** \_\_\_\_\_

**Card Security Code:** \_\_\_\_\_ (On the back of your card, locate the final 3 digit number) [What's this? Using Amex?](#)

**Address line 1:** \_\_\_\_\_

**Address line 2:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Ph#:** \_\_\_\_\_ **Fax#** \_\_\_\_\_ **email:** \_\_\_\_\_

**Authorization**

By signing this authorization, I acknowledge that I have read and agree to all of the above information and warrant all information given is true.

**Signature of Card Holder:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name of Card Holder:** \_\_\_\_\_

Fax completed form to 740.658.3963