

AV Brokers
2300 East Central Ave. Unit f
Duarte, Ca 91010
Phone: 626.256.8318 Fax: 626.256.8319

CREDIT CARD AUTHORIZATION REQUEST

Name: _____

Street: _____

City: _____ State: _____

Office Phone: _____ Home Phone: _____

Credit Card Type and Issuing Bank: _____

Card No: _____ Expiration Date: _____

I HEREBY AUTHORIZE AUDIO VISUAL BROKERS TO PROCESS THE ABOVE CREDIT CARD FOR FULL PAYMENT OF ALL OR ANY RENTAL, EXTENDED RENTAL, OR DAMAGE CHARGES INCURRED BY ME AND /OR MY COMPANY. WHEN SIGNED, THIS DOCUMENT WILL SERVE AS "SIGNATURE ON FILE" FOR ALL RENTAL AGREEMENTS IN MY NAME AND/OR IN THE NAME OF MY COMPANY.

THIS AGREEMENT MAY BE TERMINATED BY EITHER PARTY WITHIN 30 DAYS WRITTEN NOTICE OR UPON THE EXPIRATION DATE OF THE CREDIT CARD WHICHEVER OCCURS FIRST. ANY OURTSTANDING BALANCE OWED CAN AND WILL BE CHARGED TO MY CREDIT CARD. IN THE EVENT NO FURTHER CHARGES CAN BE PRECESSED ON MY CREDIT CARD, FOR ANY REASON, I AGREE TO BE PERSONALLY RESPONSIBLE TO PAY THOSE CHARGES TO AUDIO VISUAL BROKERS UPON DEMAND.

Date: _____ Signature of Cardholder: _____

Driver's License No: _____ State & Expiration: _____

Invoice/Estimate No: _____

Amount to Charge: _____

Date of Charge: _____

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Please fax this form back to 626-256-8319