



Print

**Renegades
Screen
Printing**

**1025 E. 18th St. #B
Los Angeles, CA
90021**

Ph: (213) 536.5233

jd@printrenegades.com

www.printrenegades.com

////////////////////////////////////
CREDIT CARD AUTHORIZATION FORM

BUSINESS ADDRESS

COMPANY NAME: _____

ADDRESS: _____

CITY: _____

STATE & ZIP: _____

BUSINESS PHONE: (_____) _____

CARDHOLDER BILLING ADDRESS

NAME: _____

ADDRESS: _____

CITY: _____

STATE & ZIP: _____

HOME PHONE: (_____) _____

CARD TYPE: **VISA** **MASTERCARD** **DISCOVER**

CARD NUMBER: _____

EXPIRATION DATE: _____ **3 DIGIT CVV** _____

////////////////////////////////////
PLEASE NOTE

“THIS IS TO ADVISE THAT PRINT RENEGADES, LLC IS AUTHORIZED TO ACCEPT TELEPHONE ORDERS FROM OUR BUSINESS AND CHARGE THE TOTAL COST OF THE ORDER TO MY CREDIT CARD ACCOUNT NOTED ABOVE.”

CARDHOLDER'S SIGNATURE: _____ **DATE:** _____

We REALLY appreciate your business!!
////////////////////////////////////