



**CREDIT CARD AUTHORIZATION FORM**

Card Number: \_\_\_\_\_

Expiration date: \_\_\_\_\_

3 digit security code: \_\_\_\_\_

Billing address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Full name as it appears on the card:

\_\_\_\_\_

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Please sign below:

I, \_\_\_\_\_ (print name) , authorize Dub-It to charge my credit card for the deposit of 50% of my quote total upon order-start.

I, \_\_\_\_\_ (print name), authorize Dub-It to charge my credit card for the balance due in-full upon completion, prior to shipping.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_