

# CREDIT CARD AUTHORIZATION FORM

THIS LETTER IS TO AUTHORIZE Russian Contour, INC. TO USE THE FOLLOWING CREDIT CARD FOR PHONE ORDERS PER THE FOLOWING INSTRUCTIONS:

CARDHOLDERS NAME: \_\_\_\_\_

BILLING ADDRESS OF THE CREDIT CARD: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME NO: \_\_\_\_\_ WORK NO: \_\_\_\_\_

PUBLICATION NAME: \_\_\_\_\_

CREDIT CARD TYPE:            VISA            MASTERCARD            AMEX            DISCOVER  
(Please Circle One)

CREDIT CARD NUMBER: \_\_\_\_\_ EXP DATE \_\_\_\_\_

VISA & MASTER CARD:            LAST THREE DIGITS ON BACK OF CARD            \_\_\_\_\_

AMEX ONLY:    FOUR DIGIT NUMBER OVER ACCOUNT NUMBER ON RIGHT OF CARD \_\_\_\_\_

I HEREBY AUTHORIZE Russian Contour, INC. TO USE THE ABOVE CARD FOR PAYMENT ON THIS PHONE ORDER.

DOLLAR AMOUNT AUTHORIZED: \_\_\_\_\_ APPROVAL # \_\_\_\_\_

SIGNED BY CARDHOLDER: \_\_\_\_\_ DATE \_\_\_\_\_

- FORM MUST BE COMPLETED IN FULL, SIGNED BY AN AUTHORIZED USER OF THE CREDIT CARD, FAXED AND/OR MAILED AND RECEIVED BY US BEFORE THE ORDER CAN BE PROCESSED.

RETURN COMPLETED FORM BY FAX TO:    **954-255-1645**