



BREAK OF DAY DESIGN AD&PR

1666 N. Hampton Rd. | Suite 103 | DeSoto, TX | 214.774.1124 PH | 972.224.1423 FAX
www.breakofdaydesign.com

Credit Card Authorization Form

To prevent the unauthorized use of your credit card Break of Day Design Studio LLC requires this authorization form to be completed.

- Print and complete this form.
- Authorize the charges to your credit card by signing below.

Fax signed form to **972.224.1423 NO COVER SHEET REQUIRED**

Cardholder's Name _____

D.L. # _____ or State I.D. # _____

Card Account # _____ Amount: \$ _____

Billing Address for Credit Card: _____

City _____ State _____ Zip _____

Visa _____ MasterCard _____ Expires: _____ CVV2: _____
(3 Numbers located in the back of your card)

Today's Date: _____

I agree to pay the total amount as entered above according to the card issuer agreement. I hereby authorize Break of Day Design AD & PR LLC to charge the above credit card for this amount. I agree to payment terms and 100% payment in the event this transaction is returned or denied.

Signed _____

Cardholder _____

Printed Name _____

Please verify with your bank/credit card company that all of your personal information is accurate (ie... your billing address should match the card address). If this does not occur, BOD LLC will be charged a fee.