



EXACT PRINTING
& PACKAGING INC.

TYPE IN THE BLANKS TO FILL OUT
PLEASE FAX TO (714) 283-4152 OR EMAIL TO ART@EXACTPRINTING.NET

OPEN CREDIT CARD AUTHORIZATION

TODAY'S DATE: _____

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ PHONE # _____ FAX # _____

I HEREBY AUTHORIZE EXACT PRINTING & PACKAGING, INC. TO CHARGE MY CREDIT CARD

CHECK ONE: VISA MASTER CARD AMERICAN EXPRESS DISCOVER

CARD # _____ CVV CODE: _____ EXP DATE: _____

NAME AS IT APPEARS ON CREDIT CARD: _____

CREDIT CARD'S BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CELL PHONE NUMBER OF CARD HOLDER: _____

Card Holder Authorization:

I, the above-named authorized credit card user, give Exact Printing & Packaging, Inc. express authorization to charge my credit card. I understand that once Exact Printing & Packaging, Inc. has rendered services there are no refunds. I understand that this form constitutes a legally binding contract and that by affixing my signature to this form, I will be held responsible for all charges as well as any and all collection and legal fees. This payment authorization is to remain in full force and may used for future orders until I notify Exact Printing & Packaging, Inc. of its cancelation by sending in written notice in such time and in such manner to allow both Exact Printing & Packaging, Inc. and the receiving institution a reasonable opportunity to act on it. By signing this "Credit Card Authorization" form, I acknowledge receipt and understanding of its contents.

PRINT NAME: _____

CREDIT CARD HOLDER

SIGNED: _____

CREDIT CARD HOLDER

We have the right to refuse service to anyone.
DUE TO YOUR CREDIT CARD'S REFUND POLICY, EXACT PRINTING & PACKAGING, INC. WILL BE DEDUCTING 4% FROM THE TOTAL
AMOUNT OF THE REFUND PLUS A \$50.00 PROCESSING FEE.

10071 Sycamore St • Villa Park, CA 92861 • (714) 974-3099 • Fax (714) 283-4152

www.exactprinting.net