

Date:	
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Re: Account #		
This is to confirm that by my signature be credit card below for payment on my according to the confirmation of the confirmati		ng Systems, Inc. to charge the
elect one: One-time charge of:	All Charges to account.	Delete old card
\$		
Select one:	MasterCard AMIERICAN EXPRIESS	DISCOVER' NETWORK
Card #:		
Expiration Date:		
CVV Security code (3 or 4 digit code):		
Name and Address of Cardholder:		
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Signature:		

Please fax this signed authorization, which will be kept in your credit file, to fax # 225-677-8133.