LED Lights and Parts
World of LED Lights

PIXEL PRINT LTD. (LED LIGHTS & PARTS)
CREDIT CARD AUTHOTIZATION FORM

Credit Cardholder Information			
Name on Credit Card			
Type of Credit Card	**Visa** ☐ **Master Card** ☐		
Card Number		**CVV #**	
Expiration Date			

Billing Address	
Address:	
Postal Code:	**Province/City:**
Phone Number:	**Email Address:**

Authorized User of Credit Card	
Company Name:	
Maximum Authorized Amount:	
Type of Charges:	**Keep on File** ☐ **One Time Payment** ☐
Date of Charge Preference:	**Beginning of the Month** ☐ **End of the Month** ☐ **Same Day** ☐

AUTHORIZATION OF CARD USE

_____ I Certify that I am the authorized holder and signer of the credit card reference above. I certify that all information above is complete and accurate

_____ I hereby authorize collection of payment for all charges as indicated above. Charges may not exceed the amount listed above in the "AUTHORIZED AMOUNT" field. I understand this is only for up to this amount during the time periods of "DATES OF CHARGES" referenced above. If additional charges are going to be authorized, a new form will have to be completed.

Name:_____ Signature: _____ Date: _____