

# Printing & DIGITAL COPY<sup>INC</sup>

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## Authorization Form

I, the undersigned \_\_\_\_\_  
authorize Printing Digital Copy to charge my credit card for services that I have  
requested from them to provide to me or my company. I will hold harmless Printing  
Digital Copy from any issues that may arise by my financial institutions and or  
myself. By signing this authorization, I promise to pay all fees charged to my credit  
card that will arise from this service that I requested.

Signed By: \_\_\_\_\_

Please Print Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Amount to be charged: \_\_\_\_\_

Credit Card Security Number (located on the back of the Credit Card / Usually 3 Digits): \_\_\_\_\_

Billing Statement Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Authorization Code: \_\_\_\_\_ by Printing Digital Copy