

Credit Card Authorization Form

GLF, Inc. DBA Innovate Graphics 4600-H Lebanon Rd, Charlotte NC 28227 704.573.1180 • fax 704.573.1181

In order to process payment of your invoice to your credit card, please complete the following form and fax it back to us at 704.573.1181

Company Name:	
Credit Card Billing Address:	
Customer Phone:	
I would like to charge my:	MasterCard Visa Amex (please check one)
Cardholder Name:	
Credit Card Account Number:	
Credit Card Code: Expiration Date:/	
Amount Authorized: \$	
Check the	type of Account you are authorizing
ONE TIME ACCOUNT: please initial—I authorize any applicable billable overage, shipping costs, or additional art/data expenses that may be incurred	ONGOING ACCOUNT: Please initial this as an ongoing account for continued permission to charge your card for additional jobs and/or fulfillment charges for which a paid invoice will be supplied.
Authorized Person Submitting	
(this must be an authorized signator of the credit card)	Print Name
-	Signature Date

Your signature authorizes GLF, Inc. to charge your card and confirms that you understand the charges and the purchase of this payment transaction.