

## Credit card authorization form

Date : \_\_\_\_\_

I \_\_\_\_\_ residing at

\_\_\_\_\_ in the city of \_\_\_\_\_ province of

\_\_\_\_\_ phone number : (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ authorize

DNA Spotlight Production Inc to debit the amount of

\$\_\_\_\_\_ from my credit card. (Please add 4% processing fees)

VISA

MASTER CARD

AMERICAN EXPRESS

Name of issuing institution:

\_\_\_\_\_

\_\_\_\_\_ Card number:

\_\_\_\_\_

Valid date: \_\_\_\_\_ Expiration date:

\_\_\_\_\_

Security code: \_\_\_\_\_

Please return this document by email to your representative.

Account #: \_\_\_\_\_ Order #:

\_\_\_\_\_

Name and signature

\_\_\_\_\_

\_\_\_\_\_

**Return your credit card authorization form to**

**info@DNAproduction.ca.**