



2960 STIRLING ROAD • HOLLYWOOD, FL 33020
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CREDIT CARD AUTHORIZATION

TODAYS DATE _____

I AUTHORIZE COLOR REFLECTIONS THE USE OF MY CREDIT CARD (NUMBER BELOW) FOR PAYMENT OF SERVICES AND OR PRODUCTS RECEIVED.

VISA MASTERCARD AMERICAN EXPRESS DISCOVER

CARD # _____ V # _____
(3 DIGIT CODE ON BACK)
(VISA & MASTERCARD)

EXPIRATION DATE _____

AMOUNT AUTHORIZED _____

CARD HOLDER'S NAME _____
AS IT APPEARS ON THE CARD

CARD HOLDER'S ADDRESS _____

CARD HOLDER'S TELEPHONE NUMBER _____

CARD HOLDER'S SIGNATURE _____

FOR THE ACCOUNT OF _____

INVOICE(S) IN PAYMENT OF _____
.....

I AUTHORIZE COLOR REFLECTIONS THE USE OF MY CREDIT CARD FOR FUTURE PURCHASES OF SERVICES AND OR PRODUCTS, UNLESS REVOKED BY THE CARD HOLDER.

CARD HOLDER'S NAME _____
AS IT APPEARS ON THE CARD

CARD HOLDER'S SIGNATURE _____