



1809 EAST DYER ROAD  
SUITE 307  
SANTA ANA, CA  
92705-5740

949.261.7266 PHONE  
800.261.7266 TOLL FREE  
949.261.5908 FAX

WWW.VIDEORESOURCES.COM

## CREDIT CARD AUTHORIZATION AGREEMENT

I, \_\_\_\_\_, the holder of *(check one please)*:

Visa \_\_\_ MasterCard \_\_\_ American Express \_\_\_ Discover \_\_\_

Card # \_\_\_\_\_ CCV# \_\_\_\_\_ Exp Date \_\_\_ / \_\_\_

hereby authorize Video Resources to charge the amount of \$ \_\_\_\_\_

for my current transaction – Quote or Invoice # *(if known)* \_\_\_\_\_

I have read this agreement and understand that I will be held fully responsible for the above charges.

Cardholder Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Company: \_\_\_\_\_

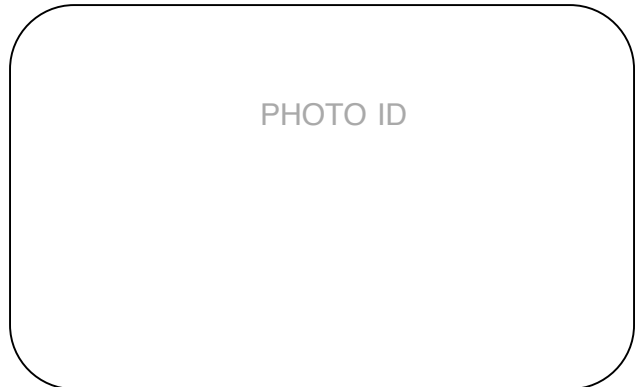
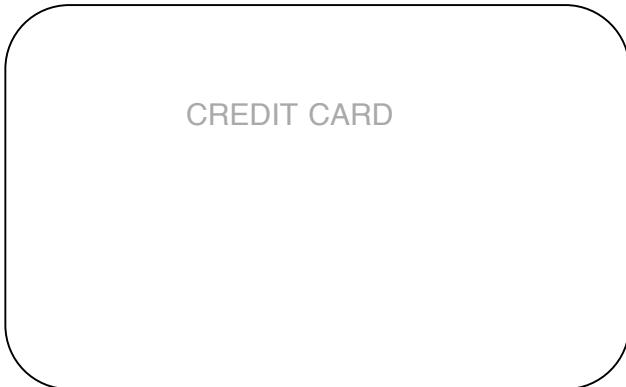
Billing Address: \_\_\_\_\_

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

Telephone 1: \_\_\_\_\_ Telephone 2: \_\_\_\_\_

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

Please include the front of the credit card and cardholder's driver license or other form of photo ID below.



Please fax this completed form to Video Resources Inc. at: 949-261-5908  
Thank you for your cooperation.