

ILLUMINAR
CREDIT CARD AUTHORIZATION

Customer Name:		
Telephone:		
Job Name:		
Credit Card Billing Name:		Billing Contact Email:
Billing Address:		
City:	State:	Billing Zip Code:
Keep Card On File? Yes No		
Credit Card Type: Visa Master Card AmEx		
Credit Card #:		Exp. Date:
Visa or MasterCard: 3 digit CID # _____ <i>(3-digit value printed on the signature panel on the back of the card)</i>		
American Express: 4 Digit CID # _____ <i>(4-digit value printed above the account number on the face of the card)</i>		
<p>By and upon signing this Credit Card Authorization, Customer authorizes Illuminar LLC to charge the credit card identified above to pay the rental charges and all other amounts due to Illuminar LLC. Customer understands and agrees that a 3.5% service charge may be added to all amounts due.</p> <p>Authorized Signature:</p>		
Print Cardholders Name:		