Card Authorization Form

I, _____, give permission to MLXL PRODUCTIONS INC to charge
Buyer name — Business name

my card for the following purchases. My card details will be stored in my profile and will only used for approved purchases.

Amount authorized | Cardholder email | Product/service

All fields required

Card information

Card type

- [ ] MasterCard
- [ ] Discover
- [ ] VISA
- [ ] AMEX
- [ ] Other _____

Cardholder (Name on card)

Card number

Billing Address

Expiration date (MM/YYYY)

ZIP code (From credit card billing address)

CVV

Recurring payments information

Charge every:
Week Month Quarter Othe _____

Charge on this date _____
(For example, the 1st of every mont

Payment amount

Product/service sold

- [ ] Email receipts
- [ ] Mail receipts to:

To cancel, contact _____
(Name and email)

Terms of agreement
(For example, cancellations must be received 1 week prior to expected billing date)

Customer signature

Date