



# CREDIT CARD AUTHORIZATION

ESTIMATE/INVOICE # \_\_\_\_\_

COMPANY/ CUSTOMER NAME: \_\_\_\_\_

CARDHOLDER NAME: \_\_\_\_\_

I AUTHORIZE DOOR MASTERS OF HOUSTON TO CHARGE THE CREDIT CARD NOTED FOR PAYMENT TOTALING \$ \_\_\_\_\_

CHECK ONE	
DEPOSIT	
PENDING BALANCE	
TOTAL AMOUNT	

VISA       MASTERCARD       AMEX       DISCOVER

CARD NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ / \_\_\_\_\_

SECURITY CODE: \_\_\_\_\_

BILLING ZIP CODE: \_\_\_\_\_

FAX NUMBER/EMAIL ADDRESS: \_\_\_\_\_

FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## THANK YOU