



5614 Cahuenga Blvd. North Hollywood, CA 91601 | T. (818) 284. 6260 | F. (818) 985. 6260 | www.goedit.tv

CREDIT CARD AUTHORIZATION

I, _____, certify and attest that I am the cardholder of the Mater Card, Visa Discover or American Express credit card/charge card listen below and that I am an authorized user of same.

Purchaser's Name (Exactly as it appears on the credit card):

Purchaser's Company Name (As it appears on the credit card - if applicable):

Billing Address (Must be the same address that appears on the credit card statement):

Credit Card Number:

Expiration Date:

Issuing Bank Name & Phone Number:

I further certify and attest that as an approved user if this charge/credit card I authorize Go Edit, Inc to debit the credit card account listed above for the total amount of:

\$ _____

I understand that this transaction is subject to an authorization by the issuing bank at the issuance of an authorization/approval code by same. I further understand that by signing this form I agree to pay all amounts due to Go Edit, Inc in the event that this transaction is subsequently charged back to Go Edit, Inc.

Date:

Signature of Card Holder/Authorized User:

In order to proceed this request, the cardholder must include a copy of their driver's license and the front and back of credit card.

For Office Use Only

Trans Date:	Invoice#:	Salesperson	Approval Code:
-------------	-----------	-------------	----------------