



**ART DIMENSIONS ONLINE**

Contemporary Art Leasing & Sales

**CREDIT CARD AUTHORIZATION FORM**

Email Completed Form to: [info@artdimensionsonline.com](mailto:info@artdimensionsonline.com)

Amount Authorized     \$ \_\_\_\_\_

Authorized For: \_\_\_\_\_

Type of Card            Amex            Visa            Mastercard

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

CVV/CVC/CID \_\_\_\_\_

Authorized User \_\_\_\_\_

Name on Card \_\_\_\_\_

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

\_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_

Card member acknowledges receipt of goods and/or services in the amount of the total shown hereon and agrees to perform the obligations set forth by the Card member's agreement with issuer.

Authorization Signature \_\_\_\_\_ Date \_\_\_\_\_