**Logo

Description automatically generated**

**CREDIT CARD AUTHORIZATION**

**PROJECT NAME:**

**PROJECT TYPE:**  FEATURE  SERIES  NEW MEDIA  COMMERCIAL  SHORT  MUSIC VIDEO

**PRODUCTION CO:**

**PRODUCTION PHONE:** **PRODUCTION EMAIL:**

**ACCOUNTING CONTACT:**

**NAME ON CARD:**

**BILLING ADDRESS:**

**CITY:** **STATE:** **BILLING ZIP:**

**PHONE NUMBER:** **EMAIL:**

**LIST ALL OTHER EMAILS TO RECEIVE FINAL PAID INVOICE:**

**CARD TYPE: \*\*PLEASE CONTACT US IF CARD IS NOT U.S. OR CANADA\*\***

VISA  MC  AMEX  DISCOVER  OTHER:

**CARD #:**

**EXPIRATION DATE:** **SECURITY CODE:**

**AMOUNT TO BE CHARGED: $**

**– ALL CREDIT CARD PAYMENTS WILL BE SUBJECT TO A 4% PROCESSING CHARGE –**

**BY SIGNING THIS FORM, YOU AUTHORIZE IMAGE OPTICS TO CHARGE YOUR CARD FOR THE AMOUNT ABOVE.**

**SIGNED:**

**DATE:**