



CREDIT CARD AUTHORIZATION FORM

CARDHOLDER INFORMATION

Name : _____ (as printed on credit card)

Billing Address :

City : _____ State : _____ Zip: _____

Card Number : _____

Expiration Date:

CVV# (back of card) : _____

Card Type : Visa Mastercard Discover American Express

I authorized Urban Global, LLC. to charge the above card in the amount of:

\$

Signature: _____

Print : _____

Date : _____

For: (description of products or invoice #'s)

I Give Urban Global, LLC. permission to keep my Credit Card information on file:

YES

NO