

I \_\_\_\_\_ Authorize \_\_\_\_\_ to charge my credit card  
(NAME) (COMPANY)

For services rendered. Not to exceed the amount shown.

REFERENCE \_\_\_\_\_

AMOUNT \$ \_\_\_\_\_ USD.

ATTACH RECEIPT HERE

CREDIT CARD TYPE \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_

CARD CSC # \_\_\_\_\_ CSC: For MasterCard, Visa or Discover it's the last three digits in the signature area on the back of your card, The four digit American Express CID is printed on the front of the card, above and to the right of the embossed card number

ISSUED DATE \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

ADDRESS ASSOCIATED WITH CARD

\_\_\_\_\_  
\_\_\_\_\_

ZIP CODE \_\_\_\_\_

Email: \_\_\_\_\_

NAME ON CARD \_\_\_\_\_  
(As it appears on card)

Phone: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**E-MAIL, FAX or MAIL TO:**  
J&S PRINTING AND NETWORKING  
11917 Paramount Blvd. # B  
Downey, CA 90241  
(562) 440-4520  
(562) 862-7341 fax  
[jose@jspn.info](mailto:jose@jspn.info)



DO NOT WRITE BELOW. COMPANY USE ONLY.

NOTES:  
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