

Credit Card Authorization Form
Sale Only

Ace Video

Pier 40 @West Houston St, NYC, NY 10014

Tel (212) 727-7969 Fax (212) 727-7679

E mail: acevideo@earthlink.net

I, _____, authorize Ace Video to charge my _____
Name *Brand of Card*
credit card # _____ security code # _____ credit card exp date ____/____/____
Credit Card Number *Date*
for the purchase of audio/video duplication services, video editing services, equipment, supplies
or other _____, for order # _____ or invoice # _____.

Customer Signature ____/____/____
Date

**Signature must be that of the card holder*

The information below must be the same as the credit card holder's credit card billing statement

Name _____ SSN _____-____-_____

Address _____

City _____ State _____ Zip _____

Note _____

Important: Please fax us a copy of valid identification (driver's lic., alien reg., passport, etc.) with the cardholder's signature.

Ver. 9/22/05

Thank you for choosing Ace Video !