

215 W. Palm Avc. Stc., #204 Burbank, CA 91502 TEL 818-557-0903 FAX 818-557-0596 Towards 2000 Inc./Lightbroker.com

Date:	
Order#:	5
2K Rep	

Credit Card Authorization Form

Notes: Shipping: Taxes: 2% Processing Fee: Total: O Visa O Mastercard O Discover O Amex Card Number: Expiration Date: Name as on card: Cardholder address: Shipping Address: O Business or O Reside	Description of Purchases:			
Notes: Taxes: 2% Processing Fee: Total: O Visa O Mastercard O Discover O Amex Card Number: Expiration Date: Name as on card: Cardholder address: Shipping Address: O Business or O Reside				
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O Business or O Reside	Name as on card:			
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river License Number: State: Expiration Date:		O H	susiness or O Residence	
	river License Number:	State: Expirat	ion Date:	
uthorize the amount above to be charged to my credit card and I agree to pay the total amount according the card issuer agreement.	uthorize the amount above to		otal amount according	
Date:		Person		