CREDIT CARD AUTHORIZATION FORM

This form authorizes The DubHouse to bill our credit card for the total of

$_____ and the balance prior to shipment (if applicable).

Credit card type Visa Master Card Discover Amex

Credit card # _____ c.v.v code _____ 3 digits on back (V,MC, D)
or c.v.v code _____ 4 digits on front (amex)

Expiration date _____

Company Name _____

Name listed on card _____

Signed _____

Address associated with card _____
Address line 1

_____
Address line 2

_____ _____ _____
City State Zip

404 SE 15th St. Fort Lauderdale, FL 33316 P: 954-524-3658 F: 954-522-1905