



CREDIT CARD BILLING AUTHORIZATION FORM VISA - MASTERCAD

I, _____ authorize to
charge my credit card in the amount of \$ _____ USD for the concept of _____

Please, fill in the following data:

Date of transaction: _____

Name of credit card holder (as stated on the credit card) _____

Credit card number _____

Date of expiry _____

CVV number / Validation Code (*) _____

Type and number of ID _____

Address _____

Contact telephone number _____

Signature of card holder

ID or passport number

IMPORTANT :

Attach: Photocopy of both sides of credit card / Photocopy of ID or passport

(*)Validation code number is on the back of the card, on the signature window, immediately after the credit card number. It has 3 digits.