## **CREDIT CARD AUTHORIZATION**

## squar-pix

This letter is to authorize squar-pix inc. to use the following credit card for phone orders per the following instructions.

ATTENTION TO:				F
CARDHOLDERS NAME:				ii W
COMPANY:				V
CREDIT CARD BILLING AD	DDRESS:			
CITY:		STATE:	ZIP:	
PHONE:			FAX:	
E-MAIL:			JOB NAME:	
CREDIT CARD TYPE:	VISA	MASTERCARD	AMERICAN EXPRESS	
CREDIT CARD NUMBER:				
EXP. DATE:		VIN # * Found on the ba	ck of your credit card by your signature strip. The Last three	#'s
I hereby authorize s for payment on the		nc. to use this cred	it card	
Dollar Amount Author	orized:			
Signed by:				
Date:				
Form must be compl	eted in fu <b>ll</b> ,	Signed by an autho	orized user of the credit card	

## **TERMS AND CONDITIONS**

- Because of differences in equipment, paper, inks, and other conditions between color proofing and production. There may or may not be a variation between color proofs and the completed job.
- The customer also warrants that the subject matter to be printed is not copyrighted by a third party.

faxed **888,503,6296** or mailed and received by squar-pix inc.

- The only way to guarantee colors and quality is by requesting a match print.
- Requesting a match print will delay the process of the job.

before any transactions can be made.

• The customer upon seeing a proof of the required print job relinquishes any and all legal claims and actions against " squar-pix inc. "

1717 Broadway Store #3 Brooklyn, NY 11207 T (888) 586-4749

F. 888.503.6296

info@squarpix.com www.squarpix.com