



Image Craft
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CREDIT CARD AUTHORIZATION FORM

PAYMENT DATE: [input field]

COMPANY NAME: [input field]

CHARGE AMOUNT: [input field]

INVOICE #: [input field]

CARD HOLDER NAME: [input field]

CONTACT INFORMATION:

Phone Number: [input field]

Email: [input field]

BILLING ADDRESS:

Street: [input field]

City: [input field]

State: [input field]

Zip: [input field]

CREDIT CARD TYPE:

VISA radio button

MASTERCARD radio button

AMEX radio button

DISCOVER radio button

CREDIT CARD INFORMATION:

Card #: [input field]

Exp Date: [input field]

CVV #: [input field]

\*Visa/MC/Discover - 3 Digit Code on Back.
\*Amex - 4 Digit Code on Front.

SAVE CREDIT CARD DATA:

YES radio button

NO radio button

\*Credit card data is stored encrypted with our payment processor, Freedom Pay. Data is not stored at Image Craft. Checking "Yes" for this option allows for easier and faster credit card transactions.\*

\*I authorize Image Craft, LLC to charge my credit card for the amount shown above. I understand that a 3% processing fee will be applied to all payments made by credit card.\*

SIGNATURE: [input field]