

## CAMERA

5900 Blackwelder Street • Culver City • California 90232 • TEL (310) 636-4600 • FAX (310) 915-5335 keslowcamera.com

## **CREDIT CARD AUTHORIZATION FORM**

Return this form via e-mail along with a legible copy of the front and back of the credit card and a copy of the cardholder's driver's license.

Date:			Contact:				
Company:			Contract/Invoice #:				
Camera, Inc. Keslow Came	era, Inc. reser	ge of \$\frac{\$}{ze any additional charge ves the right to charge any loss or damage to	ges should the the Insuran	ne equipm ce Deduct	•	riod extend.	
	it all of the bo					,	
☐ VISA ☐	AMEX	Card #:				EXP:	
☐ MC ☐	DISCOVER	CVV2/Security Code:				1	
Cardholder's Name:							
Billing Address:							
Signature:							
<b>Optional:</b> To use this	s authorizatio	n for future charges ple	ease include	the inforn	nation below	and sign.	
Charge up t	to a limit of \$_	per rei	ntal.				
Authorization	on is valid thr	ough (MM/DD/YYY):					
Signature:							