



11 Union Brick Road
Blairstown, NJ 07825
Phone: 917.881.4360
Fax: 908.362.9885
eMail: evilbrandclothes@yahoo.com

CREDIT CARD AUTHORIZATION

BUSINESS INFORMATION

Legal Business Name: _____

DBA or Store Name: _____

Business Owner: _____

Business Address: _____

Business Phone: _____ Email: _____

CARDHOLDER INFORMATION

Cardholder Name: _____

Billing Address: _____

Cardholder Phone: _____ Fax: _____

CREDIT CARD INFORMATION

Credit Card Type: VISA MasterCard American Express Discover

Credit Card Number: _____

Expiration Date: _____ Security Code (on back of card): _____

CHARGE AUTHORIZATION

Authorization on file for calendar year 2010

I hereby authorize Evil Brand Clothes to process the above credit card for the purchase of Evil Brand Clothes products. I assume personal and individual responsibility and liability, and guarantee payment of all charges due and payable to Evil Brand Clothes.

Cardholder Signature: _____

Print Name: _____

Date: _____

All information will be kept strictly confidential.

Fill out and sign form.

Fax to: 908.362.9885 or Email to: evilbrandclothes@yahoo.com