



PERFECT IMAGE PRINTING
SAME DAY SERVICE

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CREDIT CARD
**AUTHORIZATION
FORM**

I, the undersigned _____
authorize Perfect Image Printers to charge my credit card for services that I have
requested from them to provide to me or my company. I will hold harmless Perfect
Image Printing from any issues that may arise by my financial institutions and or
myself. By signing this authorization, I promise to pay all fees charged to my credit
card that will arise from this service that I requested.

Signed By: _____

Please Print Name: _____

Credit Card Number: _____

Exp. Date: _____ Amount to be charged: _____

Credit Card Security Number (located on the back of the Credit Card / Usually 3 Digits): _____

Billing Statement Address: _____

City: _____ State: _____ Zip: _____

Authorization Code: _____ by Perfect Image Printers