



# Magnetic Image Video

129 Jordan Street  
San Rafael, CA 94901  
415-456-7900 main 415-485-3874 fax  
www.mivideo.com

## Credit Card Authorization Form

Today's date: \_\_\_\_\_

Credit card #: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Verification #: \_\_\_\_\_



3 Digit Card Verification Number

Name on card: \_\_\_\_\_

Signature: \_\_\_\_\_

Type of card: VISA                      Mastercard                      AMEX

Billing address information

Street: \_\_\_\_\_

Apt/Suite/other: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Please fax completed and signed form to 415-485-3874