



1809 EAST DYER ROAD
SUITE 307
SANTA ANA, CA
92705-5740

949.261.7266 PHONE
800.261.7266 TOLL FREE
949.261.5908 FAX

WWW.VIDEORESOURCES.COM

CREDIT CARD AUTHORIZATION AGREEMENT

I, _____, the holder of *(check one please)*:
 Visa ___ MasterCard ___ American Express ___ Discover ___
 Card # _____ CCV# _____ Exp Date ___ / ___
 hereby authorize Video Resources to charge the amount of \$ _____
 for my current transaction – Quote or Invoice # *(if known)* _____

I have read this agreement and understand that I will be held fully responsible for the above charges.

Cardholder Name: _____

Signature: _____

Company: _____

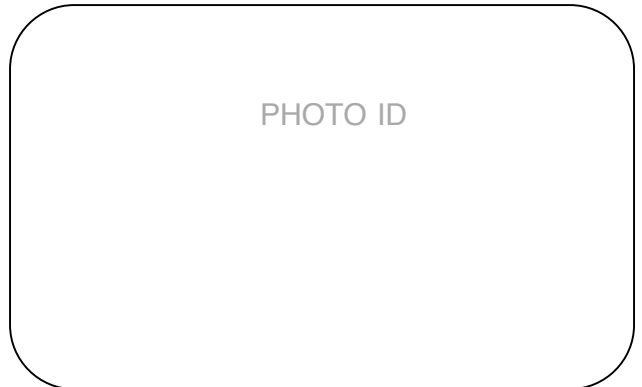
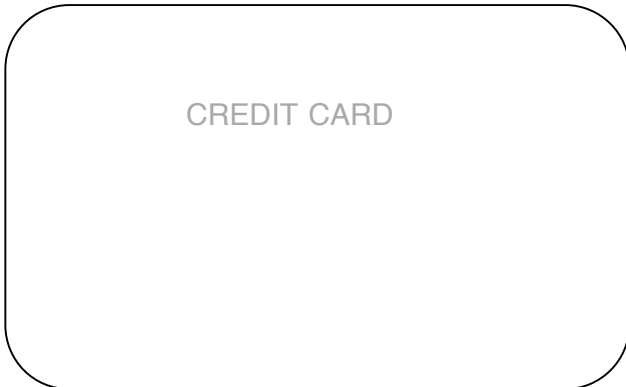
Billing Address: _____

City, State, Zip: _____

Telephone 1: _____ Telephone 2: _____

Date: _____

Please include the front of the credit card and cardholder's driver license or other form of photo ID below.



Please fax this completed form to Video Resources Inc. at: 949-261-5908
Thank you for your cooperation.