



Please Fill out and Fax Back, ASAP. This will allow us to proceed with your order

Credit Card Authorization Form & Payment Guarantee

Credit card #		Expires	
Cardholder Name		Phone	
Cardholder Address		Fax	
City, State & Zip		Country	

Company Name		Floor/Suite	
Company address		Phone	
City, State & Zip		Fax	
To The Attention of:			
Payment by:	<input type="checkbox"/>	Credit Card	<input type="checkbox"/>
		Co. Chk.	<input type="checkbox"/>
		Bill @ End	<input type="checkbox"/>
Amount authorized for replacement Value ten times rental cost:	<input type="text"/>	Amount of rental Quote:	<input type="text"/>

I , do hereby authorize Drape Kings (aka dru whitacre MEDIA SERVICES, ltd.) to charge my AMEX?VISA?MC card # job #

The total charges would be limited to replacement costs of cleaning, damages, lost equipment and any outstanding rental invoices.

<u>Cardholder signature</u>	<u>Date</u>	<u>Client Name</u>	DrapeKings can use this card until (enter date): <input type="text"/>
	<input type="text"/>	<input type="text"/>	

You Must Fax a Copy of the Front and Back of You Credit Card along with this form. Thanks.