



SECURITY DEPOSIT FOR DAMAGES
Casa Theodore, Inc.

Property:

I, _____ give Payment Processing permission to charge my American Express:

(Circle one) Visa MasterCard American Express

In The Amount Of \$ 5,000 _____

Credit Card #: _____

CVV # : _____

Expiration Date: _____

Name As It Appears On Card: _____

Address: _____

City, State/Province: _____

Zip Code (and Country, if not U.S.): _____

Email Address: _____

BY SIGNING THIS YOU UNDERSTAND THAT THIS AMOUNT WILL BE CHARGED ON YOUR CREDIT CARD 1 WEEK PRIOR TO RENTAL DATES, AND THAT THE AMOUNT WILL BE REFUNDED IF NO DAMAGES ARE INCURRED.

Signature

Date