



CREDIT CARD AUTHORIZATION

Casa Theodore, Inc.

Property:

I, _____ give Payment Processing permission to charge my:

(Circle one) Visa MasterCard

In The Amount Of \$ _____

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 TODAY, AND THAT A CREDIT CARD FEE WILL BE
APPLIED.**

Signature

Date