

# Credit Card Authorization Form



www.sweetd.com  
(818) 407-4755

I hereby authorize Sweet Deal to make repeat charges to the credit card below for each transaction. This authority will remain in effect until Sweet Deal is notified by me, in writing, to cancel it.

**Mastercard**

**Visa**

Credit Card #:

Expiration Date:

CVV:

Zip code:

Up to the following amount per transaction:

## **Cardholder Information**

Cardholder Name:

Billing Address:

Business Phone:

Mobile Phone:

I agree to pay the repeat transaction amount, up to the amount provided above, according to the card issuer agreement.

**Cardholder Signature:**

**Print Name:**

**Date:**