



CREDIT CARD AUTHORIZATION FORM

DATE _____

I, the undersigned, authorize San Diego Stage & Lighting Supply to charge my Credit Card.
Missing or damaged rental equipment will be charged to this card unless certificate of insurance is provided
naming San Diego Stage & Lighting Supply, Inc. as additional payee.

JOB # (SLS, RTL, OR SER #) _____

OTHER (PLEASE EXPLAIN): _____

AMOUNT: _____ TYPE OF CARD: _____

NAME ON CARD: _____

CARD NUMBER:

EXP DATE ON CARD: _____

V CODE (ON BACK OF CARD): _____

BILLING ADDRESS FOR
CARD: _____

BILLING ZIP CODE: _____

AUTHORIZED SIGNATURE OF CARD HOLDER

NAME OF COMPANY: _____

A.M. PHONE: _____ FAX NO.: _____

ADDITIONAL INFORMATION NEEDED:

San Diego Stage & Lighting Supply, Inc.
2203 Verus Street
San Diego, CA 92154
619-299-2300 fax 619-299-0058
Ca License # 822754