

CREDIT CARD AUTHORIZATION



Hamburg Brothers
333 E Carson St, Ste 525
Pittsburgh, PA 15219

Phone: 412/488-4428
Fax: 412/488-4434

You are hereby authorized to use the following charge card:

Card Number _____

Expiration Date _____

Card Type VISA _____

Master Card _____

Discover _____

Name on Card _____

Card Billing Address

Street _____

City _____

State _____ Zip Code _____

I hereby certify that I am the authorized signer for the card listed above.

Authorized Signature _____

I acknowledge that this authorization may be delivered and/or returned by fax and that my facsimile signature shall be deemed to be the same as my original signature for all purposes.

Signature

Date

Company Name _____

Hamburg Account Number _____