

PIX, Inc.
211 South LaBrea Avenue
Los Angeles, CA 90036
323-936-8488 Voice
323-936-5209 Fax
CREDIT CARD AUTHORIZATION

Date _____ I, _____, hereby authorize
PIX Inc. and/or PIX Film to utilize the below referenced credit card to satisfy
rental security and/or payment for rental or sale. (ALL INFORMATION REQUIRED!)

___ Card # _____ Expiration Date _____

___ V-Code # _____ CID # _____
(Visa/Mastercard-last 3 #'s on signature strip) (AMEX -- 4 digit # on front above card number)

___ Exact Cardholder Name _____

___ Cardholder Signature _____

___ Exact Card Billing Address/Zip _____

___ Phone number at the card billing address _____

(Pix employee: in space at left, initial each line above indicating verification procedures have been completed.)

NOTE! If you wish to limit the use of the above authorization to a specific person or to an expected time period, please complete the following:

The person stated below is hereby **authorized to bind**, with his/her signature, the above referenced credit card **on behalf of the cardholder** in order to satisfy payment and/or rental security to PIX Inc. and/or PIX Film for the expected time period _____.

Print name of authorized person **who will be present** at time of pickup to sign for credit card purchase on your behalf: (**ID will be required at pickup**) _____

Signature of person you authorize: _____

Their Driver's License # _____ DL State _____ SS# _____

After completing this document, please forward via FAX to PIX. Thank you!