



Main Office and Warehouse
1215 South Jefferson Avenue
Saginaw, Michigan 48601-2699
989.755.7741 ■ Fax 989.755.0910

Branch Warehouse
2752 Mullins Avenue NW
Grand Rapids, Michigan 49544
616.791.0060 ■ Fax 616.791.0057

Credit Card Authorization Form
Please Print *Clearly*

Name on Credit Card: _____

Card Number: _____ Card Type: _____

Expiration Date: _____ CVV2 Code: _____ *(This is the last 3 digits on the back of Visa, Master & Discover Cards on the signature panel)*

Issuing Bank & City & State: _____

Address Credit Card Bills are Sent to:

Please sign EITHER "Blanket" OR "One Time" purchase section

For BLANKET Charge authorization:

I agree to pay total amount charged to me by Cinderella, Inc. on all orders called, faxed or e-mailed to Cinderella, Inc. or entered online, from time to time, according to Card Issuer Agreement. I am also requesting that Cinderella, Inc. keep this information on file. This authorization is to remain in force until revoked in writing.

Authorized Signature: _____

Date: ___/___/___

For ONE TIME Charge authorization:

Amount of Charge: U.S. \$ _____ Description: _____

I agree to pay total amount charged to me by Cinderella, Inc. on this order called, faxed or e-mailed to Cinderella, Inc. or entered online, according to Card Issuer Agreement.

Authorized Signature: _____

Date: ___/___/___

Please Include a copy of your card when you fax this completed form back. Thank you.
Direct fax number to accounting department is 989.921.6154.
