

**Credit Card Authorization Form**

I, \_\_\_\_\_, hereby authorize Scambook.com to charge my Credit card account in the amount not to exceed: \$ \_\_\_\_\_ .

( ) VISA ( ) MasterCard ( ) American Express ( ) Discover

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_ / \_\_\_\_ VID/CVV Code: \_\_\_\_\_

Credit Card Billing Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ - \_\_\_\_\_ Country: (if not US) \_\_\_\_\_

Telephone: ( ) \_\_\_\_ - \_\_\_\_\_

Name/Address of Scambook.com Account Owner if other than Credit Card Holder:

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ - \_\_\_\_\_ Country: (if not US) \_\_\_\_\_

Telephone: ( ) \_\_\_\_ - \_\_\_\_\_

As the Credit card holder, I hereby authorize receipt of goods & services at the shipping address above.

\_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ /

Cardholder's Signature

Date

Authorization Valid Until: \_\_\_\_ / \_\_\_\_ Initials Here: \_\_\_\_\_

Your completion of this authorization form helps us to protect you from credit card fraud.

Scambook will keep all information entered on this form strictly confidential.

Please print, sign and scan/fax this original signed form to: [business@scambook.com](mailto:business@scambook.com)

**Scambook.com**  
**501 Franklin Avenue**  
**Suite 200**  
**Garden City, NY 11530**