



Credit Card Authorization Form

Please indicate card: **Mastercard** **Visa**

WE DO NOT ACCEPT AMERICAN EXPRESS OR DISCOVER

Card No.: _____

Exp. Date: _____ Security Code: _____

Billing
Address: _____

City/St/Zip _____ / _____ / _____

Invoice No.: _____ Amount: _____

A 3% CONVENIENCE FEE WILL BE ADDED TO THE TOTAL TRANSACTION

Cardholder Signature: _____

UMG Representative: _____

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