



7862 N. Academy Blvd.  
Colorado Springs, CO 80920  
Phone 719-424-7565  
Fax 719-559-1710

### **Authorization for Credit Card Use**

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

Credit Card Type:     Visa     Mastercard     Discover     AmEx

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

Expiration Date: \_\_\_\_\_

CVV Number: \_\_\_\_\_ (3 or 4 digit code on the back)

I authorize Tracey's Boutique to charge the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_