



CREDIT CARD PROCESSING AND AUTHORIZATION FORM

Please fill out the authorization form and email back to The LiT tv Network at: info@littvnetwork.com. You can also print a copy for your records and give your account executive the original copy. All credit card information below is required including the credit card verification code. By signing and completing this form you authorize and grant us permission to charge your credit card as outlined below:

STEP 1

PERSONAL INFORMATION

First Name:

Last Name:

Billing Address:

STEP 2

BILLING INFORMATION

Credit Card Type:

Credit Card Number:

Expiration Date:

CCV Code:

(credit card verification code)

(last 3 digits located on the back of the credit card)

STEP 3

PROJECT INFORMATION

Initial Setup Amount (one time):

USD

Monthly Broadcast / Maintenance Amount To Charge:

USD

(monthly maintenance pays for the client portal for easy content changes, unlimited app content hosting, unlimited push notifications, and app analytics access)

I authorize _____ to charge the agreed amount listed above to my credit card. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Rep Code:

cardholder signature

date

cardholder printed name
