



Advance Blueprint & Digital Copy, Inc.
dba Advance Reprographics
2102 Hancock Street
San Diego, CA 92110
619-297-7734 Fax 619-325-3652

CREDIT CARD AUTHORIZATION

Business Name: _____

Address
where CC
Statement
is received: _____

City: _____ State _____ Zip _____

Telephone Number _____

E-mail address _____

I hereby authorize Advance Reprographics to apply charges to my credit card as stated below for amounts incurred for services rendered. Charges will be made against my credit card by Advance Reprographics at the completion of each order. A receipt will be mailed to me after each charge. I understand it is my responsibility to reconcile my charges and statements. Should I have any questions, I will immediately contact Advance Reprographics Accounting Department at 619-297-7734, within 10 business days of charge date(s). This authorization shall be valid until further notice. I hereby release Advance Reprographics and its affiliates from any and all liabilities as a result of this service. All information contained herein is strictly confidential.

- Visa
- MasterCard
- American Express
- Discover Card

Card # _____

Expires: _____ Security Code (3-digit from back of card) _____

Card Holder's Name: _____

For AMEX, use 4-digit code
on front of card

Card Holder's Signature: _____

Date: _____