



FLEX MUSSELS NYC

CREDIT CARD INFORMATION

1) Name on credit card: _____

2) a) Billing Address: _____

b) Shipping Address: (if applicable) _____

3) Check one: _____ Visa _____ Master Card _____ Amex

4) Credit Card Number: _____

5) Expiration Date: _____

6) Three digit verification code: _____

7) Authorized Amount \$: _____ 8) Authorized Gratuity (if applicable):\$ _____

9) Name on Reservation (if applicable): _____

PLEASE READ AND SIGN:

This fax serves as official authorization for Flex Mussels to process a charge my credit card listed above.

I understand that this transaction will not be processed without a copy of the front and back of my signed credit card.

Signature: _____ **Date:** _____