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CREDIT CARD AUTHORIZATION FORM

I hereby authorize **David J. Woods Productions Inc.** to charge my credit card:

Charge my ___ Visa ___ Mastercard ___ American Express

Card No.:	
Expiry Date:	
Name On Card:	
Customer Name:	
Address:	
Telephone No.:	
Our Invoice No.	
Signature of Card Holder:	

Note: Sorry, forms cannot be e-mailed. Please either fax, or mail it back to us.