

**GREGORY COURT REPORTING SERVICES, INC.**

CREDIT CARD AUTHORIZATION

To enable processing of your order, the following information is needed:

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address (use credit card billing address, including Zip Code)

\_\_\_\_\_  
Phone

\_\_\_\_\_  
E-Mail Address

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Print Name of Authorized Signature

\_\_\_\_\_  
Name as it appears on credit card (if different from above company name)

Credit Card (ej genlqpg)    ""MasterCard    ""Visa    ""American Express    ""Discover

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

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

Amount Authorized: \$ \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Today's Date \_\_\_\_\_

FAX COMPLETED FORM TO: 239.774.5261

**IMPORTANT:** Your credit card billing will show a transaction from Gregory Court Reporting Service, Inc. in the amount above.