



CRAWFORD INDUSTRIES, INC.

PO Box 5171

High Point, NC 27262

336-884-8822

Fax: 336-884-8835

[www.ArtisticQuiltingInc.com](http://www.ArtisticQuiltingInc.com)

## CREDIT CARD AUTHORIZATION FORM

PLEASE PRINT AND COMPLETE THIS AUTHORIZATION FORM AND RETURN TO US.  
ALL INFORMATION WILL REMAIN CONFIDENTIAL.

Cardholder Name \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Credit Card Type: \_\_\_\_\_ VISA      \_\_\_\_\_ MasterCard      \_\_\_\_\_ Discover

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

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

Card Identification Number (last 3 digits located on the back of the credit card): \_\_\_\_\_

Amount to be charged: \$ \_\_\_\_\_ (USD)

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

Cardholder – Print Name, Sign, and Date Below:

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return completed form to:

Lynn Crawford  
Artistic Quilting  
PO Box 5171  
High Point, NC 27262-5171  
Fax: 336/884-8835  
[Kcraw4d@aol.com](mailto:Kcraw4d@aol.com)