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CREDIT CARD AUTHORIZATION FORM

DIRECTIONS: Complete all fields below. If needed, a blank form can be downloaded at jdwebsolutions.com/ccform. When done, email back to support@jdwebsolutions.com.
Thank you.

CLIENT INFORMATION

Client Name:

Organization Name:

Website Address:

Billing Street Address:

City: State: Zip:

Mobile Phone:

E-mail Address for Receipts:

CREDIT CARD INFORMATION

Cardholder Name (as shown on card):

Card Type: VISA MasterCard American Express Discover Card

Card Number:

Expiration Date (mm/yy): Security Code:

ACKNOWLEDGEMENT

I authorize JDWeb Solutions to charge my credit card using the info above one-time and/or on a subscription basis for agreed upon services (e.g., Client Plan, Express Site Plan, Domain Names). I understand that my info will be securely saved on file for future authorized transactions.

Customer Signature

Today's Date