



## CREDIT CARD CHARGE AUTHORIZATION FORM

**1700 N Batavia St., Orange, CA 92865**  
**Phone (714) 850-9227**  
**www.instantjungle.com**

Customer/Business Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

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

Expiration Date (MM/YY): \_\_\_\_/\_\_\_\_ CVV: \_\_\_\_\_

I hereby authorize Instant Jungle LLC to charge the above listed credit card for service rendered and/or product received.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_