



Clear Glass Mobile Service, Inc.

Credit Card Authorization Form

Date / /

I authorize Clear Glass Mobile Service, In.c to charge the amount of \$_____ to my
Visa Mastercard American Express Discover Credit Card

The following information is provided to Clear Glass Mobile Service, Inc.

Account Number

Name as it appears on Credit Card

Billing Address for Credit Card

Expiration Date

Securtiy Code

******Please attach a copy of your dirver license******

Signature of Account Holder