



Individually Me, Inc.
dba Las Vegas Wheels

4350 Arville St, Suite 160
Las Vegas, NV 89103
Phone (702) 272-0509
Fax (866) 812-0455
sales@lvwheels.com

Credit Card Authorization Form

CARDHOLDER INFORMATION Name: _____

Billing: _____

Street Address: _____

City: _____ State: _____ Postal Code: _____

Shipping Address: _____

Email: _____ Telephone: _____

PAYMENT INFORMATION

Invoice #: _____

I authorize a one-time charge against my credit card for the follow amount \$ _____

I authorize a recurring charge against my credit card as invoices are due

CREDIT CARD INFORMATION

Credit Card Type: MasterCard Visa American Express

Number: _____

Expiration Month: _____ Expiration Year: _____

Security Code: _____

I hereby authorize Individually Me, Inc. dba Las Vegas Wheels to initiate a credit card charge for the listed above, to the credit card number I have provided on this form. Charges on the credit card statement will appear as Individually Me, Inc.

Cardholder Signature X _____ Date: _____

Please email form to sales@lvwheels.com, fax to (866) 812-0455 or text to (702) 449-9169.