



www.migunworld.com

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Credit Card Authorization Form

I, _____ (Name), hereby authorize MIGUN USA CORP. to charge my credit card account.

() VISA () MasterCard

Credit Card Number: _____

Expiration Date: ____ / ____ VID Code: _____

Credit Card Billing Address :

Street: _____

City: _____ State: _____

Zip-Code: _____ - _____

Telephone: () ____ - _____

Requested Shipping Address:

Street: _____

City: _____ State: _____

Zip-Code: _____ - _____

Telephone: () ____ - _____

As a Credit Card Holder, I hereby authorize receipt of goods & service at the shipping address above.

Cardholder's Signature

____ / ____ / ____
Date

As the credit card holder, I also authorize **MIGUN USA CORP.** to charge my credit card for future purchases verbally approved by me.

Authorization Valid Until: ____ / ____ Initials Here: _____

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. MIGUN USA will keep all information entered on this form strictly confidential.