



Micah's Jewelry, Inc.
250 Spring Street NW
Suite 6S-349
Atlanta, GA 30303
Phone: 404-223-1228
Fax: 800-249-3658
Email: billing@micahs.com

Micah's Credit Card Charge Authorization

Business Information:

Business Name: _____

Cardholder Name: _____

Credit Card: Visa MasterCard Am Express Discover

Card Number: _____

Expiration Date: _____

Amount to Charge: *Full Balance of Invoice(s)*

I, the cardholder, authorize Micah's Jewelry Inc. to charge the full balance of any invoice(s).

Cardholder Signature: _____ Date: _____

Billing Information:

Cardholder Name: _____

Business Name: _____

Billing Address: _____

City: _____

State: _____

Zip Code: _____

Note: Billing address must match the credit card billing address.

Please fax this Credit Card Charge form to 800-249-3658.

The above information will remain confidential. This application must be completed in full. By signing this authorization you represent and warrant the accuracy of the information.