

A Party 4 Less

10530 SW 184 Terr.

Miami, FL. 33157

305-235-9188

Fax: 305-235-9727

CREDIT CARD PAYMENT AUTHORIZATION

CUSTOMER: _____

Please charge my credit card listed below, for A Party 4 Less

Invoice Number _____, the amount of \$ _____

Type MC () Visa () Discover () AE ()

Card Number: _____

Authorization Security Code: _____

Issuing Bank: _____

Expiration Date: _____

Card Holders Name: _____

Card Holders Driver's License Number: _____

State Issued By : _____ Expiration Date: _____

Billing Address: _____
(Of Credit Card) _____

Phone: _____

Fax: _____

*** PLEASE NOTE THAT AFTER THE FIRST UNSUCCESSFUL ATTEMPT TO PICK UP ITEMS THERE WILL BE AN ADDITIONAL PICK UP FEE CHARGED TO THE CARD ON FILE***ITEMS WILL BE DELIVERED & PICKED UP FROM GROUND LEVEL OTHERWISE A FEE OF \$85 +TX WILL BE CHARGED TO THE CARD ON FILE**

All Orders Containing Linens Are Provided With A Linen Bag. All Linen Must Be Placed Dry & Free Of Debris In Bag Upon Pick Up. If Linen Bag Is Not Returned A Replacement Fee Will Be Charged To The Card On File

All reservations with A Party 4 Less requires a 50% Non-Refundable deposit in advance of the event to secure a reservation. In the event of cancellation deposit and or any moneys paid toward order will be applicable for future bookings, but it will not be refunded. **If the amount to be charged is not filled in, the full amount on the invoice will be charged.**

Authorized Signature: _____