



CREDIT CARD AUTHORIZATION

Credit Card Type (Check One)

MasterCard <input type="checkbox"/>	Visa <input type="checkbox"/>	American Express <input type="checkbox"/>	Discover <input type="checkbox"/>
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Credit Card No.	Exp.:	3 Digit Code:
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Name as it appears on Credit Card:

Cardholder Billing Address as listed with Credit Card Company:
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City:	State:	Zip:
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Telephone No.:

Being the cardholder or Corporate Officer, by signing below I understand and agree to the terms set forth in this agreement, agree to pay, and specifically authorize River Birch, Inc. to charge by credit card, for the services provided. River Birch, Inc. will provide me with an itemized monthly statement detailing all of my charges. I further agree that in the event my credit card becomes invalid, I will provide River Birch, Inc. with a new, valid credit card upon request, to be charged for the payment of any outstanding balances owed to River Birch, Inc.

Authorized Signature:	Date:
Account Name:	Date of Service Agreement:
Comments:	

2000 South Kenner Road
Avondale, LA 70094
504-436-1288
504-436-7247