



COSMIC PATTERNS SOFTWARE, INC. | WWW.ASTROSOFTWARE.COM

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CREDIT CARD AUTHORIZATION FORM:

VisaCard, MasterCard, DiscoverCard, AmericanExpressCard

SOFTWARE REGISTERED USER INFORMATION: ID# or CEDULA# _____

First Name: _____ **Middle:** _____ **Last Name:** _____

Address: _____ **Phone #:** _____

E-mail Address: _____

CREDIT CARD HOLDER INFORMATION:

I _____, authorize Cosmic Patterns Software, Inc. to charge the amount of \$ _____ to my credit card for the order of the following products registered to the above "Software Registered User" including the shipping cost:

List of Products: _____

Shipping Method: _____ Shipping Cost: _____

(Note: Shipping cost will be adjusted to the appropriate shipping method used)

CREDIT CARD#: _____ Exp. Date: _____ CardCode: _____

Card Holder's Name (that appears on card): _____

Billing Address: _____ Phone #: _____

E-mail: _____

Attached is a copy of the front and back of my credit card, and ID card. I confirm that I am the authorized and legal Card Holder (owner) of this credit card.

Signature: _____ **Date:** _____

Fill out this page, sign it, then either save it to file and e-mail it to us: cosmicmatrixorder@gmail.com