



Thexis LLC

15029 N Thompson Peak Pkwy
Suite B111-495
Scottsdale, AZ 85260
+1 702 966 3034
EMAIL orders@thexis.net

CREDIT CARD AUTHORIZATION FORM

_____ AUTHORIZES SaggerzSkaterz Studios/Thexis LLC to charge:

- Prepayment
- Monthly
- Net 30

ON CREDIT CARD #: _____

EXPIRING ON: _____ WITH A CVV CODE OF _____.

THE NAME THAT APPEARS ON THE CARD IS _____

THE BILLING ADDRESS IS _____

THE BILLING ZIP CODE IS _____.

THIS CARD IS TO BE KEPT ON FILE TO BE CHARGED ACCORDINGLY WHEN THE BALANCE OF COMPANY'S ACCOUNT IS DUE.

SIGNED BY: _____

(Financial Director/Comptroller of Company)

DATE: _____