



**RIGATONI CREDIT CARD AUTHORIZATION**

**RIGATONI INC.  
3437 W. KENNEDY BLVD.  
TAMPA, FL 33609  
PHONE: (813)879-7000  
FAX: (813)879-3025  
INFO@cateringbyrigatoni.com**

**I AUTHORIZE RIGATONI INC. TO CHARGE MY ACCOUNT AS PER YOUR ORDER. I ALSO AGREE TO PAY THE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT (MERCHANT AGREEMENT IF CREDIT VOUCHER). ALL SALES FINAL AND DEPOSITS ARE NON-REFUNDABLE.**

**NAME OF CARD  
HOLDER** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY, STATE, ZIP  
CODE** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**CREDIT CARD TYPE:    VISA            MASTERCARD            AMEX**

**CREDIT CARD NUMBER** \_\_\_\_\_

**EXPIRATION DATE** \_\_\_\_\_

**AUTHORIZED SIGNATURE OF CARD  
HOLDER** \_\_\_\_\_

**DATE** \_\_\_\_\_