



CREDIT CARD AUTHORIZATION FORM

SBIR/STTR PHASE "0" PILOT PROGRAM

I hereby authorize Enterprise Florida, Inc. to charge my credit card the registration fee(s) in the amount of \$_____ for participation in the SBIR/STTR Phase "0" Pilot Program.

Type of Credit Card: American Express Visa Master Card

Credit Card #: _____ Expiration Date: _____

Billing Address: _____

Name on Credit Card: _____

Authorized Signature: _____

E-mail address: _____

Fax, E-mail (scanned with signatures) or mail to:
Jay Robinson
Enterprise Florida, Inc. Tel. 407-956-5607
800 N. Orange Ave. Fax 407-956-5545
Suite 1100 jrobinson@eflora.com
Orlando, FL 32803

Attn: Jay Robinson

1/10/06