



Credit Card Authorization Form

To have your payment processed by credit card (Visa, MasterCard, American Express) please follow the instructions below. Since our credit card transactions are conducted on-line we will supply a receipt, upon request.

Should you require further information please call, 800-200-0003 X317 Athena Davis

Instructions:

1. Please complete the form below.
2. Fax completed form to 866-277-5163

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Company Name: _____

Card Holder's Name: _____

Card Billing Address: _____

Phone Number: _____

Card Type: _____

Card Number: _____

Cardholder Verification Value (4 or 3 digit code on front/back of card): _____

Expiration Date: _____

Invoice Numbers to be Paid (including amounts):

Invoice# _____ Amount \$ _____

Invoice# _____ Amount \$ _____

Invoice# _____ Amount \$ _____

Other: _____

Would you like your invoices automatically charged to your account?

Yes No Other: _____

Authorized signature

Print Name

Date