

**PLEASE COMPLETE HIGHLIGHTED AREAS**

**Company Name:** \_\_\_\_\_

**Card Holders Name:** (as it appears on card)

\_\_\_\_\_

**Billing Address:** \_\_\_\_\_

\_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_

**Sales Order / Invoice #** \_\_\_\_\_ **Amount: \$** \_\_\_\_\_

Type of card: ☐  ☐ 

**Card #** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **vvc#** \_\_\_\_\_

**Expiration Date:** \_\_\_\_ / \_\_\_\_ **Authorization Code** \_\_\_\_\_

I agree to pay the full amount according to the card issuer agreement. (Merchant agreement if credit voucher). Customer will be liable for all collection costs, including attorney fees, whether or not a lawsuit is filed. Minimum cancellation fee is \$50.00 and cancellation will NOT be accepted on merchandise that has started production.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Print Name:** \_\_\_\_\_

For office use only

Card Processed \_\_\_\_ / \_\_\_\_ / \_\_\_\_ by \_\_\_\_\_