

## Credit Card Information Form

Please fill out this form and fax it to us. Upon receiving your credit card information, we will process your order right away.

**To:** **Company:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**From:** **Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Order ID:** \_\_\_\_\_

**Credit Card:**  Visa  Master Card  American Express  Discover

**Card Number:** \_\_\_\_\_

**Card Holder's Name:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Card Security Code:** \_\_\_\_\_

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

**Signature:** \_\_\_\_\_

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

By signing this form, I confirm that I am the authorized holder of the credit card mentioned above, thus agree to pay the costs involved in the aforementioned item (Order ID), including shipping and handling charges, and accept the responsibility of the terms and.