



## CREDIT CARD PAYMENT FORM

<i>CREDIT CARD INFORMATION</i>	
<b>Card Type</b>	<input type="checkbox"/> <b>Visa</b> <input type="checkbox"/> <b>MasterCard</b> <input type="checkbox"/> <b>American Express*</b>
<b>Credit Card Number</b>	
<b>Expiration Date</b>	
<b>Card Code</b>	
<i>CUSTOMER CONTACT INFORMATION</i>	
<b>Name as it Appears on Card</b>	
<b>Billing Company</b>	
<b>Billing Street Address (MUST INCLUDE ZIP CODE)</b>	
<b>Country</b>	
<b>Phone</b>	
<b>E-mail of Card Holder</b>	

FOR INVOICING PURPOSES, PLEASE COMPLETE THE FOLLOWING IF DIFFERENT FROM ABOVE:

<b>(1) Person, company, telephone, fax, and address to be used on our Invoice.</b>	
<b>(2) Person, company, and address to whom we should mail the invoice and credit card receipt.</b>	

\* We prefer not to accept American Express.

**Note:** We no longer accept Discover Card.