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## CREDIT CARD INFORMATION FORM

**Customer Name:** \_\_\_\_\_

**Sales Rep:** \_\_\_\_\_

*The following information is needed to process a credit card transaction.*

**Name** (as it appears on Card): \_\_\_\_\_

**Billing Address** (include street address, city, state, and zip code):

\_\_\_\_\_  
\_\_\_\_\_

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

**Credit Card Information:** ↑ **Visa** ↑ **MasterCard** ↑

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

**Expiration Date:** \_\_\_\_\_ **Security Code:** \_\_\_\_\_

**Invoice Numbers:** \_\_\_\_\_

**Total:** \_\_\_\_\_

**Customer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_