

# **CREDIT CARD INFO**

## **VISA CREDIT CARDS ONLY**

PRINT AND COMPLETE. FAX TO **ATTENTION: MARCI**, 248-471-0745

PO# TO APPLY PAYMENT TO:

NAME AS IT APPEARS ON CREDIT CARD:

ADDRESS WHERE THE CREDIT CARD STATEMENT IS SENT:

VISA CARD NUMBER:

EXPIRATION DATE:

3-DIGIT SECURITY CODE:

### **SHIP TO INFO:**

COMPANY:

ADDRESS:

CITY/STATE/ZIP:

PHONE:

EMAIL ADDRESS TO SEND CONFIRMATION: