



CREDIT CARD FOR POSTAGE

Step 1: General Information (Please Print)

Customer Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____

Step 2: Payment Information

Credit Card # _____ Expiration Date (mm/yy): _____ CVVR#: _____

Type of Card: American Express Visa Mastercard

Name as it appears on Card: _____

Card Billing Address: _____ City: _____ State: _____ Zip: _____

DESIGNATE TYPES OF PAYMENTS UNDER CURRENT AGREEMENT TO BE CHARGED:

For postage (to include a handling charge of 5%) _____

Terms and Conditions

The undersigned hereby authorizes Panaprint, Inc. to charge the full amount of the payments designated above due under its agreement with Panaprint Inc. to the credit card indicated above. The undersigned understands and agrees that it is making these payments according to the provisions of the applicable agreement between it and Panaprint Inc. If the credit card used for these charges is declined for payment for any reason, the undersigned understands and agrees that it remains responsible for the full amounts of the payments according to such agreement. The undersigned understands and agrees that a right to a refund from the credit card or Panaprint Inc. is subject to all provisions of the underlying agreement and to its credit card account or Panaprint Inc. agreement. The undersigned acknowledges and agrees that the dollar amount of the foregoing payments will appear on its credit card billing statement and that it will be obligated to pay that amount to the credit card in accordance with the terms of its credit card account agreement. The undersigned shall attempt to resolve any inquiry or dispute with respect to its payments on the credit card with Panaprint Inc.

Credit Card Holder Signature: _____ **Date:** _____

Please sign and return completed form by email to accounting@panaprint.com or fax to 478-788-9509 (secured).