



## Decore-active Specialties Credit Card Agreement

Credit card will be charged within 24 hours when order is placed.

Automatic Payment Option (Fax Form to **626-254-6799**)

### Company Information

Company Name: \_\_\_\_\_

Customer Code: \_\_\_\_\_ Contact Name: \_\_\_\_\_

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

### Credit Card Information

Credit Card Type: Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Discover \_\_\_\_\_ Amex \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card Holders Name: \_\_\_\_\_ Security Code: \_\_\_\_\_

**i** The security code is a 3-digit code printed on the back of your card in the signature box, usually following your complete card number or portion thereof. It is used as an additional security precaution.

Credit Card Billing Address (where you receive your credit card statements):

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

### Automatic Payment

I authorize Decore-active Specialties to automatically charge my credit card listed above for all future purchases, until I notify them otherwise in writing.

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**i** **PLEASE CONTACT YOUR CREDIT CARD COMPANY AND DISCUSS RAISING YOUR DAILY CHARGE AMOUNT TO AVOID DELAYS IN YOUR ORDER.**