

Choose One Credit Card Option

Fax Completed Form to 626.254.6799

Auto Credit Card

Credit Card provided will be charged within 24 hours of order placed

Recurring Credit Card

Credit Card provided will be charged for all future orders when notified

One-Time Payment

Credit Card provided will be charged for a one-time only transaction (complete below section)

Company Information:
Company Name: _____
Customer Code: _____
Contact Name: _____ Phone: _____
Ship to Address: _____
Email Address (for receipt): _____

Complete Only for One-Time Payment:
Total amount to be charged \$ _____
I hereby authorize Decore-ative Specialties to charge the above total amount to my credit card

Credit Card Information:
Choose One: <input type="checkbox"/> Credit Card <input type="checkbox"/> Debit Card
Choose One: <input type="checkbox"/> American Express <input type="checkbox"/> Discover
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard
If either "Auto Credit Card" or "Recurring Credit Card" was chosen above, then the name of the credit card MUST MATCH the Owner's name or the Authorized User's name of the company.
Card Number: _____
Expiration Date: _____ Security/CID Code: _____
Card Holders Name: _____
Security or CID Code (Card Identification Number) is an added level of protection. The code is a 3-digit number printed on the signature panel (at the end of your account number), on the back of a Discover, Visa, or Mastercard. If using an American Express, the 4-digit number is printed on the face of the card (above the account number).

Credit Card Billing Address:
Street: _____
City: _____ State: _____
Zip Code: _____ Country: _____
Authorization:
When choosing to purchase with a credit card, a 2.5% surcharge applies for each transaction.
I, _____ (print name), authorize Decore-ative Specialties to charge my credit card above for the agreed upon future purchases. I understand my information will be saved for future transactions on my account, if the "Auto Credit Card" or "Recurring Credit Card" option was selected.
Cardholder Signature: _____
Date Signed: _____