



**CHARGE BY PHONE**

Please check one:  VISA  MASTERCARD  AMERICAN EXPRESS

ACCOUNT #: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

(1) CVV2 CODE: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ AMOUNT TO BE CHARGED: \$ \_\_\_\_\_

FULL NAME AS IT APPEARS ON CREDIT CARD:

\_\_\_\_\_

BILL TO ADDRESS (where Credit Card statements are mailed):

\_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_

CUSTOMER ACCT #: \_\_\_\_\_ (internal use only)

JOB #: \_\_\_\_\_ (internal use only)

*I hereby warrant and represent to Duro-Last, Inc. that the information that I have provided herein is true and accurate. I hereby authorize Duro-Last, Inc. to charge my (circle one) Visa/ MasterCard/American Express referenced above in the amount of \$ \_\_\_\_\_.*

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

Thank you!

\*\*\*The information provided above is personal and confidential\*\*\*

Please fax this form to 800-432-9331

(1) CVV2 Code (Customer Verification Value) is located on the reverse side next to the signature line.