

CREDIT CARD INFORMATION FOR INVOICE PURPOSE:

Credit card name:	VISA MasterCard	American Express		
Project Name:				
Project #:				
Credit card holder:				
Amount:				
Credit card number:				
Expiration date: Security Code:	/ (MM/YY)			
INV	DICING	SHIPPIN	IG ADRESS	
Company name		Company name		
Address		Address		
City	State	City	State	Zip
Zip code Phone #	·	code		
Tax ID (W9)		Tax ID (W9)		
PO#		Contact name		
Email		Phone #		

IMPORTANT: Please take note that all information is confidential, and all records of this credit card sheet will be deleted when the invoice will be process by the accounting department.