

Credit Card Authorization

Rapid Copier Service Co
215-942-9766
Fax 215-942-9768
Outside PA 1-866-891-1620
Email: admin@rapidcopier.com
Web: www.rapidcopier.com

Please fill out completely, sign and fax
back to 215-942-9768



Company Name: _____

Address: _____

Phone number: _____ **Fax number:** _____

Email: _____

Credit Card Type. Check One

- ? **Visa**
- ? **Master Card**
- ? **American Express (Green, Gold, Silver....No Blue)**

Credit Card # _____ **Exp:** _____ / _____

V Code (last 3 numbers on the signature line, Visa & Master Card only) **V-** _____

Name as it appears on the card (REQUIRED): _____

Credit Card Billing Address (REQUIRED): _____

City: _____ **State:** _____ **Zip:** _____

Card Holder Signature: (REQUIRED): X _____

*I authorize the use of my credit card by Rapid Copier Service Co

For your convenience, initial the proper box below.....

* Rapid Copier Service will use this authorization to charge any future approved purchases until date: _____

OR

* One time charge only. For Inv. # _____ or Other, Describe below:

Amount Approved: _____