

PERSONAL CREDIT CARD BILLING AUTHORIZATION

Please bill the following VISA/MASTERCARD credit card for purchases made from Minitronics / PHS Logistic Supplies and shipped to the address listed below. All purchases are in US funds. This authorization is for the amount of \$_____ plus shipping and handling as applicable. I certify that I am the legal owner of the credit card listed below, and that this card is valid and in good standing.

This form may be completed online, printed, signed, and FAXED or emailed

<p style="text-align: center;">CREDIT CARD TYPE: VISA_____ MASTER CARD_____</p> <p>CREDIT CARD NUMBER: _____</p> <p>EXPIRY DATE: _____ VERIFICATION CODE (CVV) _____</p> <p>NAME ON CREDIT CARD: _____</p> <p>ADDRESS STATEMENT IS RECEIVED: _____</p> <p>ZIP CODE: _____ PHONE: _____</p> <p>AUTHORIZED SIGNATURE: _____ DATE: _____</p>

ORDERS TO BE SHIPPED TO:

NAME/COMPANY _____

ADDRESS: _____

CITY & STATE: _____ ZIP: _____

PHONE#: _____ FAX#: _____

EMAIL: _____

I understand that the amount billed will be converted to Canadian Dollars based on the exchange rate of the day, and may include a small handling fee. All shipments over US\$100.00 may be insured at my own expense unless I specifically decline the insurance in this form and assume full responsibility in the event of loss or damage during shipment.

I REQUEST INSURANCE ON ABOVE ORDER: YES: _____ NO: _____

Return this authorization:
By FAX: 1-888-878-2040
Email: sales@peephole.ca

MINITRONICS / PHS LOGISTIC SUPPLIES
3882 MAIN STREET BOX 74113
VANCOUVER, BC, CANADA, V5V 3N9
PH: (604) 278 - 0783 FAX: 1-888-878-2040