

(Please attach a copy of Credit Card and Driver's License)

Company Name: _____ DBA: _____

CREDIT CARD INFORMATION

Card Type (check one) VISA MasterCard Discover American Express

Credit Card No: _____

Credit Card Expiration Date: _____

Credit Card CVV No: _____

Card Holder Name: _____

Corporate Name: _____

Card Holder Billing Address: _____

City: _____ State: _____

Issuing Bank: _____ Issuing Bank Phone No: _____

Issuing Bank Fax: _____ Card Holder Driver License No: _____

SHIPPING ADDRESS

(Please insert all shipping addresses, which you intend to use if they are different than the cardholder's billing address. Insert shipping addresses below and on attached sheet.)

Recipient's Name: _____ Recipient's Phone No.: _____

Recipient's Address: _____

City: _____ State: _____ Zip: _____

I affirm that I am an authorized signer on this credit card. I authorize Eighty One Enterprises, Inc. to ship the merchandise purchased with the above credit card account number to the above credit card billing address and the company billing address as well as any and all addresses insert in this form under the heading "Shipping Address". And I am fully aware that my credit card is being charged for any such purchases and/or shipping. I will not hold Eighty One Enterprises, Inc. responsible in any way for shipping the merchandise to such addresses.

Cardholder's Signature: _____ Date: _____