



## Credit Card Authorization

### Company Information

Company Name: \_\_\_\_\_

Mimeo Account ID: \_\_\_\_\_

### Credit Card Information

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Billing ZIP Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

### Authorized Charges (select ONE):

Recurring charges for warehouse and fulfillment services.

Payment of invoice(s) listed below:

Charge each invoice separately or a one-time charge?  Separately  One-Time

One-time charge amount: \_\_\_\_\_

Is a receipt is required?  Yes  No

If "Yes" above, email receipt to: \_\_\_\_\_

Invoice #	Amount	Invoice #	Amount	Invoice #	Amount

### Authorization:

Name of Person Authorizing Charge(s): \_\_\_\_\_

Signature of Person Authorizing Charge(s): \_\_\_\_\_

**IF YOU ARE DIGITALLY COMPLETING AND SIGNING THIS FORM, DISREGARD THE FOLLOWING.**

**FOR ALL OTHERS:**

**Fax this completed form to:** Attn: Cheryl Steele Fax: 901.566-8951

**Or email to:** cardpayments@mimeo.com