

CREDIT CARD INFORMATION

This must accompany all orders



NAME AS IT APPEARS ON CARD:	TYPE OF CARD <input type="checkbox"/> Mastercard
	<input type="checkbox"/> Visa
BILLING ADDRESS OF CARDHOLDER:	<input type="checkbox"/> Discover
Street:	<input type="checkbox"/> American Express
City: State: Zip:	TODAY'S DATE:
# () () () ()	
EXPIRES /	
3 Digit code on right signature panel <input type="text"/>	
(On the reverse of your credit card)	

I hereby authorize Cordially Yours to charge my credit card for the enclosed order at the posted prices plus the return shipping charges.

Signature of Cardholder