Jamestown Rubber Stamp Company
1611 Foote Ave. Ext. • P.O. Box 1377 • Jamestown, NY 14702-1377
Phone: (716) 484-8185 • Fax: (716) 483-0728
Email: orders@jamestownrubberstamp.com
www.jamestownrubberstamp.com

CREDIT CARD AUTHORIZATION FORM

Company Name: _____ **Date:** _____

I, _____, authorize Jamestown Rubber Stamp Company to charge on my credit card the following:

☐ **One Time Charge**: $_____ U.S. Dollars
☐ **Charge All Invoices**:
☐ **Hold For Other Payment**:
(Card will be charged 10 days from invoice date if no other payment is recieved)

Credit Card Information:

Credit Card: ☐**Mastercard** ☐**Visa** ☐**American Express** ☐**Discover**

Credit Card Number: _____

Expiration Date: _____/_____/_____
(Month) (Day) (Year)

Credit Card Bill To Address: _____

City State: _____

Bill To Zip Code: _____

Signature Panel Code: _____
(AMEX 4 Digit on Front of Card DISC MC/VISA 3 Digit on Back)

Cardholders Name: _____
(Exactly as it appears on card)

X_____
(Signature of Cardholder)

Please fax this completed authorization back toll free to 888-315-3233