

Franklin

Document Services

Credit Card Billing Information

Company Name:
Contact Person(s):
Phone Number:
Fax Number:

Credit Card Type: _____ 2% service charge on Amex

Credit Card Numbers: _____

Expiration Date: _____

Name on Card: _____

Billing Address: _____

City: _____

State: _____

Zip Code: _____

ID number (Amex is 4 digits on the front, top right) _____

Comments: _____

Authorized By: _____

Your Name