

Credit Card Payments

Card Member Name {Our Customer Name}

Address {Billing Address}

City State Zip

Card Member Name {as appears on Card}

Address {as appears on Credit card bill}

City State Zip

Card Type



Account #

3 digit ID on back of Card

Exp. Date

Charge Amount

Appr Code:

Card Processed By

Order Form #

Invoice #

Date:

Peach Tree