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| **Commercial Credit Card Order****Cardholder’s Name and Information** (as it appears on the credit card statement) |
| Please charge my: [ ] Visa [ ] MasterCard [ ] American Express Card #      | CVC#      |
| Expiration Date:       | Amount Authorized (US $):       | Todays Date:       |
| Name as it appears on Credit Card:       |
| Address:       |
| City:       | State:    | Zip/Postal Code:       | Country:       |
| Phone Number:       | Fax Number:       |
| Card Holders Email Address:       |
| \***Authorized Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Note: By signing above, you are authorizing Appenx, Inc, to debit your Credit Card for the authorized amount listed above.** |
| **Ship To:** |
| Name:       | Company:       |
| Address:       |
| City:       | State:    | Zip/Postal Code:       | Country:       |
| Phone Number:       | Fax Number:       |
| Special Instructions:       |
| **Participating Dealer:** |
| Name:       | Company:       |
| Address:       |
| City:       | State:    | Zip/Postal Code:       | Country:       |
| Phone Number:       | Fax Number:       |
| P.O. Number:       | P.O. Date:       | Email Address:       |
| **Appenx Signage:** |
| Item | Qty | Product # / Quote # / Invoice # / See attached listing / Description | Unit Price | Extended Price |
| 1 |       |       | $      | $      |
| 2 |       |       | $      | $      |
| 3 |       |       | $      | $      |
| 4 |       |       | $      | $      |
| 5 |       |       | $      | $      |
|  | **Subtotal:**  | $      |
| **Installation:** | $      |
| **Prepay:** | $      |
| **5% CC Fee:** | $      |
| **Shipping:**4% of net/Min $9.00 | $      |
| **Total:** | $      |