

OVER 15 YEARS

# **PROMO PLUS**

AD PRODUCTS

P.O. BOX 427, COLLEYVILLE, TX 76034

www.adproductstogo.com

PH: 817-485-2458

FAX: 817-656-0224

EMAIL: SERVICE@ADPRODUCTSTOGO.COM

PLEASE DISREGARD THIS FORM IF YOU HAVE ALREADY PROVIDED UP WITH CREDIT INFORMATION VIA PHONE or ONLINE

**THANK YOU FOR THE ORDER YOU HAVE PLACED WITH US -  
HOWEVER, WE CANNOT PROCESS YOUR ORDER UNTIL WE HAVE YOUR INFORMATION ON FILE**

## **FAX CREDIT CARD FORM**

**PRINT OUT THIS FORM, FILL IT IN, THEN FAX THE CREDIT CARD INFORMATION TO US**

ALL INFORMATION IS CONFIDENTIAL

Please fill out the information below - we cannot start on your order processing until we have your card on file. Thank you.

**BUSINESS CARD ORDERS:** WE WILL PROCEED WITH ORDER PROCESSING AS SOON AS WE HAVE YOUR INFORMATION ON FILE. WE WILL CONTACT YOU IF THERE ARE ANY QUESTIONS.

**CUSTOM PRINTED ORDERS:** YOU WILL RECEIVE A PROOF WITH ORDER DETAILS AND IMPRINT COPY TO REVIEW BEFORE WE PROCEED.

### **CREDIT CARD PAYMENT INFORMATION**

This information is needed to match your credit information to your order.

**Co. or Organization Name on Order:** \_\_\_\_\_

**Name on Order:** \_\_\_\_\_ **Date of Order:** \_\_\_\_\_

**Type of Product ordered:** \_\_\_\_\_  
(GENERAL DESCRIPTION such as Calendars, Notpads ... etc)

\_\_\_ MASTER CARD    \_\_\_ VISA    \_\_\_ AMEX    \_\_\_ DISCOVER

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EXP. DATE

\_\_\_/\_\_\_  
MO YR

**CREDIT CARD NO.** (PRINT CLEARLY)

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**SECURITY CODE** -LAST 3 DIGITS ON BACK OF VISA, MC or DISCOVER  
or 4 NUMBERS ON THE FRONT UPPER RIGHT SIDE OF AMEX

**FIRST NAME of Cardholder** \_\_\_\_\_

**LAST NAME of Cardholder** \_\_\_\_\_

**STREET or PO BOX ADDRESS Card statement is mailed to:**

\_\_\_\_\_

**ZIP CODE of above address** \_\_\_\_\_

***Thank You For Your Order!***

**Please fill out and fax back to: 817-656-0224**