National Imprint CORPORATION
MANUFACTURERS AND PRINTERS OF ENVELOPES AND STATIONERY

a **Custom Resale Group** company

CORPORATE - CREDIT OFFICE

DATE: _____

TO: Credit Department

1. _____
Mastercard/Visa/Discover Account #

2. _____
Name of Account Holder/Name on Card

3. _____
Expiration Date

Amount of Charge Invoice#, Job# or PO#

_____

_____

_____

_____

Our bank charges us a $45.00 service charge on declined credit cards. We will have to pass on this charge should this card be declined.

Distributor # _____ Zip Code _____ Street/PO Box Number _____

Approval Code _____ Corporate Card _____ Personal Card _____

I authorize National Imprint Corporation to pay these charges with my credit card.

Signature _____

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