



Credit Card Authorization

Company Information

Company Name: _____

Mimeo Account ID: _____

Credit Card Information

Credit Card Number: _____

Expiration Date: _____ Billing ZIP Code: _____

Name on Card: _____

Authorized Charges (select ONE):

- Recurring charges for warehouse and fulfillment services.
- Payment of invoice(s) listed below:

Charge each invoice separately or a one-time charge? Separately One-Time

One-time charge amount: _____

Is a receipt is required? Yes No

If "Yes" above, email receipt to: _____

Invoice #	Amount	Invoice #	Amount	Invoice #	Amount

Authorization:

Name of Person Authorizing Charge(s): _____

Signature of Person Authorizing Charge(s): _____

IF YOU ARE DIGITALLY COMPLETING AND SIGNING THIS FORM, DISREGARD THE FOLLOWING.

FOR ALL OTHERS:

Fax this completed form to: Attn: Cheryl Steele Fax: 901.566-8951

Or email to: cardpayments@mimeo.com