



For Office Use Only
Project # _____ Client _____

## **Credit Card Payment Sheet**

If you are paying your design fees by credit card, please fill out the information below and send with your signed proposal. For your added security this information will be locked in the company safe.

Card# \_\_\_\_\_

Expiration mo./yr. \_\_\_\_\_ CVV# \_\_\_\_\_ (can be found on back of card)

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_

*You can also call in your credit card information to 888-422-0361.*