
DATE

ACCOUNT NUMBER

BILLING ADDRESS

CART TYPE

Visa

American Express

Mastercard

NAME *As is Appears on Card*

Expiration Date

Card Number

3 digit code

Authorize True Meaning to charge my credit card without email or phone call approval.

PO's

Up To 6

MAXIMUM PO CHARGE

Freight Not Included

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

By signing this form, I authorize True Meaning to charge my credit card for all PO's noted on this form. I understand the PO's written on this form will be the only ones charged to my credit card. I also understand I will not be notified prior to shipping regarding these charges and will receive a credit card receipt only after the goods have been shipped. My credit card will remain on file.

Notify me by:

Email

Fax

SIGNATURE

Date

PRINT