



PO Box 391
Rome, GA 30162
Phone: 706-234-1184
Fax: 706-234-9141

For credit card payment, please fax the completed form to 706-234-9141

Print Company Name: _____

Contact Phone: _____ Zip Code: _____

Invoice # to Pay: _____ Amount to Pay: \$ _____

Please circle one: VISA MASTERCARD

Card Number: _____ Exp Date: _____

Name on Card: _____

Card Billing Address: _____

Signature: _____

We appreciate your business!