

corporate source

best-in-class products + architectural walls + project management

Credit Card Payment Authorization

In payment of Corporate Source, Ltd. invoice # _____

I, _____, a duly authorized agent / employee of
_____ authorize the credit card payment of
\$ _____ for services rendered as indicated by Corporate Source, Ltd.

Our firm uses cash discounted pricing. Other than gvmt entities, you must include a 4% credit card fee if choosing to pay by credit card.

☐ Visa CV2 (3 digit code) _____

☐ Master Card CV2 (3 digit code) _____

☐ American Express CV2 (4 digit code) _____

Card Number: _____

Expiration Date: _____

Billing Address:

Signature of Authorized Agent

Phone Number

Email Address

Fax Number

Date

Please email this completed form to

cslccpayment@tospartners.com

*a receipt will be emailed to you for your records