



Credit Card COD Form

We accept Visa, MasterCard, Express and Discover. Please complete the form below and fax to us at 770-455-8842 or email back to michelle@graphicscentralinc.com.

Please direct any payment questions to Michelle Dorminey.

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Credit Card: Visa MasterCard American Express Discover Card

Name on Card: _____

Card Number: _____ Exp. Date: _____ Security Code: _____

Graphics Central Inc. is authorized to charge the amount due on the following invoices:

Invoice # _____ Amount Due \$ _____

Invoice # _____ Amount Due \$ _____

Invoice # _____ Amount Due \$ _____

OR

ALL FUTURE INVOICES

Print Name / Title: _____

Signature as it Appears on Credit Card: _____