



Touch International Credit Card Form

Date:

Thank you for your recent order. In order to process your credit card payment promptly, please completely fill out the following form and fax it back to Touch International at (512) 491-6381.

CREDIT CARD INFORMATION		
<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMERICAN EXPRESS
Credit Card Number:		
Expiration Date:	VID Code (Back of Card):	
CREDIT CARD BILLING ADDRESS (AS APPEARS ON CREDIT CARD STATEMENT)		
Company Name:		
Primary business address:		
City:	State:	ZIP Code:
How long at current address?		
Telephone:	Fax:	E-mail:
TAX INFORMATION		
Is your company taxable? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please attach your Uniform Sales & Use Tax Certificate)		
SHIPPING ADDRESS IF SAME AS BILLING ADDRESS		
Company Name:		
Primary business address:		
City:	City:	City:
How long at current address?		
Telephone:	Telephone:	Telephone:
AMOUNT OF PURCHASE		
Written:		
Numeric:		
Date of Charge:		
CARD HOLDERS SINGATURE		
Name as Appears on Card:		
Signature:	Date:	