

CREDIT CARD ORDER FORM

Date:	Company Name:				· · · · · · · · · · · · · · · · · · ·	
Applicant's Email Address:						
Cardholder Name:	Direct Phone:					
Credit Card Type: (check one)	VISA: MASTERCAR					
Credit Card Number:						
Expiration Date:						
MMP Product Part Number		Qty	Pri	ce ea.	Total	
		•				
				\$		
						
				\$	<u> </u>	
				•		
	-			_		
						
			S	ubtotal: 3	<u> </u>	
Shipping Information: Ship -To	Address:					
			Reques	sted Deliv	ery Date:	
	· · · · · · · · · · · · · · · · · · ·					
Purchase Order Number: (if ne	eded)					
Method of Shipment (Ground, N	Next-Day, Second Day, etc.) _	· · · · · · · · · · · · · · · · · · ·				
For U.S. customers: Should we	add shipping costs to your Cre	edit Card?	YES	NO		
Otherwise, please provide a UF	S or FEDEX account number:				_	
Is this sale tax exempt*? YES	NO					
*If this sale is tax exempt we will reconfirmation email if we do not alread economic nexus requirements for you	y have one on file. If this sale is not t	our state. W ax exempt W	e will req	uest this fo nly add sale	rm in your s tax if the	

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Email: sales@midwestmotion.com