

Credit Card Authorization Form

Customer Name:		(Exactly	(Exactly as is appears on card)		
We accept the following cre	dit cards:	DISCOVER MILE BOOK DOOD BOOK MASSIER GOOD VISA	CONTRACTOR USALISE Cards		
Credit Card Type: VISA M	aster Card	AMEX Dis	scover		
Card Number:		CVC Code	Date and they have a section of the control of the	CONTRIBUTIONS LEAS BURGERS LEAST MATURET HAMP CONTRIBUTION	
Exp. Date:	(mm/yy) <u>A</u>	amount to be charged	\$	-	
Credit Card Billing Address:					
I authorize NASET to charge my	credit card list	ed above for "Amount	to be charged"	as indicated above.	
Cardholder's Name:					
Signature:					
Ship to Address: Same as Billing - ()					
Upon successful entry of payment	information y	you will receive an emai	il confirmation	of your payment.	
Email address for confirmation of	payment proc	essing:			
Fax form to: 1-800-424-0371 or	Mail to:				
NASET Processing Center 3642 E. Sunnydale Drive Chandler Heights, AZ 85142					