

**MODERNE ELECTRONIQUE**  
 9252 Lacordaire St Leonard QC  
 H1R 2B7 Canada  
**Fax 514 326-5582 Tel 514 326-4649**  
**CREDIT CARD PAYMENT FORM**

**CREDIT CARD INFORMATION**

Customer Name:	
Credit Card Type:	<input type="checkbox"/> Visa <input type="checkbox"/> Master Card
Credit Card Number:	Expiration Date:
Name as it appears on Credit Card:	CVC2 Code:
Payment Amount :	
Signature:	Date:

**CREDIT CARD BILLING ADDRESS**

Street Address:		
City:		
State:	Zip/Postal Code:	Country:
Phone Number:	Fax Number:	

**SHIPPING INFORMATION**

Ship To:
Phone Number

**ORDER INFORMATION**

Purchase Order (If Applicable):			
Qty	Part Number / Description	Unit Price	Extended Price
Tax:			
Total:\$			

\*\*\* For Office Use Only \*\*\*

<input type="checkbox"/> Approved    Approval Code _____                      Date: _____ <input type="checkbox"/> Declined
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