



**international patterns incorporated**

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## Charge Card Form

Bill to Name \_\_\_\_\_

Bill to Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount of Charge \_\_\_\_\_

Card Type     Visa     Master Card

Charge Card# \_\_\_\_\_

Expiration Date \_\_\_\_\_

V# (3 digits on card back) \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_

Card Holder's Name: \_\_\_\_\_

Card Holder's Complete Address: \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_

State & ZIP Code \_\_\_\_\_