



VERI-DRY, LLC – DXair

CREDIT CARD PROCESSING FORM

NOTE: ONLY MASTERCARD AND VISA ARE ACCEPTED – NO PHONE CALLS ACCEPTED

DATE: _____ CUSTOMER PO#: _____ JOB#: _____

NAME AS IT APPEARS ON CARD: _____

MASTERCARD VISA CARD NUMBER: _____

EXPIRATION DATE: _____ 3 DIGIT SECURITY CODE: _____

BILLING ADDRESS FOR CRDSIT CARD STATEMENTS:

PART #: _____ COST: _____ FREIGHT: _____

PART #: _____ COST: _____ FREIGHT: _____

PART #: _____ COST: _____ FREIGHT: _____

SALES TAX IS APPLICABLE FOR FL, MD, AND MI UNLESS ACCOMPANIED BY SALES TAX ID NUMBER AND/OR RESALE CERTIFICATE.

PLEASE FAX COMPLETED FORM TO CHRIS LEONETTI AT (239) 790-5190

EMAIL: chris@dxair.com