

IMPORTANT: FOR BEST RESULTS, DOWNLOAD THIS FORM AND OPEN IN ADOBE ACROBAT TO EDIT. DO NOT COMPLETE THIS FORM USING YOUR INTERNET BROWSER.



# Credit Card Information

## Payment Information

Company Cardholder Name Email

Card Number Expiration Date Security Code

## Billing Information

Check here if Credit Card Billing Address is the same as the "Bill To" on the Séura Sales Order.

Street Address Suite #

City State Zip/Postal Code Telephone

## Authorization

Amount to be Charged

Optional: Séura Sales Order Number

Signature Date

Keep payment information on file for future orders.

Save and email this completed form to your Séura contact.

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