

## Please fill in all information below and EMAIL back to us Please Note: credit card charge will say Gary & Associates, Inc. CREDIT CARD SERVICE CHARGE IS 3% PAYMENT AUTHORIZATION

Visa [ ]	MasterCard [ ]	AMEX [ ]
Card Name:		
Card Number:		
Exp. Date:		
Quote or Invoice #		
Original Amount: \$_	+ 3% \$	Total \$
Verification Code:		
(Last 3 digits at the back of the	card)	
Billing Address:		
I hereby Authorize Restarthe credit card on this re	urant Furniture Source to initiate payment in cord.	the amount specified above using
•	cial institution to honor this payment. If I sharges as charged by the bank.	all dispute the amount of invoice, I
Signature:		
Print Name / Position / S	ignature/ Date	