

CREDIT CARD DEPOSIT FORM

- Please provide a copy of the credit card, and a valid photo ID.
- Please complete and email to: ar@columbiadistribution.com or Fax: (562) 986-1367

Client Code#: _____ **Date:** _____

Customer Name: _____

Type of Credit Card: _____ **Name on Credit Card:** _____

Credit Card Number: _____ **Expiration Date:** _____ **Security Code:** _____
 (AMEX =4 Digits, VISA/MC=3 Digits)

Billing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

PAYMENT FOR INVOICES

Customer and the cardholder hereby authorizes Columbia Distribution Services ("CDS") to charge the credit card identified above for the amounts indicated on the applicable invoices and for the credit processing fee listed below.

<u>Invoice Number</u>	<u>Amount</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Invoice Amount:	\$ _____
Processing Fee: (2.7% - VISA/MC, 2.95% - AMEX)	\$ _____
Transaction Total:	\$ _____

Customer and cardholder jointly waive any right they might otherwise have to dispute the credit card transaction(s) described in this Credit Card Deposit Form (the "Form") now or at any time in the future. Moreover, Customer and cardholder jointly agree to indemnify and hold harmless Columbia Distribution Services for any loss, expense (including attorney's fees), and/or damage of any kind that CDS may incur as a result of a credit card charge back or other dispute arising from CDS's processing of the credit card transaction(s) described in this form. Should the credit card transaction(s) described in this Form be disputed by Customer and/or the cardholder at any time, the full transaction total listed above shall become due and owing immediately. This provision shall remain in full force and effect both during and after the termination of this form.

***CARDHOLDER'S SIGNATURE** _____ ***DATE** _____

REQUIRED

I hereby authorize Columbia Distribution Services to keep the above credit card information on file for future payment processing.

CARDHOLDER'S SIGNATURE _____ DATE _____
Cardholder's signature must be on both signature lines in order for the "On File" authorization to become effective.