



I request Pro Feet, Inc. to use the following credit card to pay for purchase orders I place:

Date: _____

Company Name: _____

Company Address: _____

Phone: _____

Fax: _____

E-mail: _____

#1 account _____ Exp. Date _____
Billing address on card _____

#2 account _____ Exp. Date _____
Billing address on card _____

#3 account _____ Exp. Date _____
Billing address on card _____

Authorized signature: _____

Print or type name: _____