



Credit Card Authorization Form

(Print, Complete and Return)
Fax 770-840-7029 / 1-800-783-9010

I/We hereby authorize Color Imaging Inc. to debit my credit card as indicated:

Customer ID Number : _____

Company Name: _____

Please check one:



MasterCard Visa Discover American Express (Requires a 1.5% surcharge on invoice total)

Please check one:

For all orders submitted. One-time order only, Invoice Number: _____

Credit Card Number: _____ Expiration Date: _____

Security Code: _____

	Visa, MasterCard, Discover Last 3 digits on back of card.
	American Express: Last 4 digits in small print on front of card.

Name as it appears on card: _____

Credit Card billing address: _____

City: _____ State: _____ Zip: _____

Country : _____

Additional people authorized to use credit card:

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Printed Name: _____ Signature: _____

Warranty and Term and Conditions

I/We understand that Color Imaging Inc. ships all products F.O.B. Norcross, GA and that I am responsible for all shipping and handling charges. No returns will be accepted without a return authorization issued by technical service department. All credit card purchases are made on a no-refund Store Credit Only basis. All returns may be subject to a restocking fee. I/We hereby consent to abide by the Terms and Conditions and Warranty set out on all invoices or incorporated therein by reference, which may be amended from time to time. Color Imaging, Inc.'s Warranty and Term and Conditions applicable to each sale can be found on our website at www.colorimaging.com. By reference hereof, the Terms and Conditions and Warranty are hereby incorporated and made part of this Credit Card Authorization Form. I/We agree and understand that all necessary collection and legal expenses, including but not limited to collection agency fees, reasonable attorney fees, court costs, filing fees, interest, and service fees may be charged to the debtor in the event of default or failure to pay for goods and services provided. I/We acknowledge that Color Imaging, Inc. reserves the right to charge interest at the maximum rate allowed by law, in the event of a debtor's default or failure to pay for goods and services sold and delivered. I/We represent that neither I/We nor any entities I/We control or are affiliated with have ever been the subject of a lawsuit which involved a claim by a supplier for payment for goods and services delivered. I/We hereby acknowledge receipt of a copy of Color Imaging, Inc.'s Terms and Conditions and Warranty, a copy of which is also on Color Imaging, Inc.'s website: www.colorimaging.com.

Cardholder Signature: _____ Date: _____

Title: _____