

Payment with Credit Card / Zahlung mit Kreditkarte

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Your Purchase Order No.: _____
PO - Date: _____
Company Name: _____
E-Mail (Contact Person): _____

Credit Card: Visa Master Card

Credit Card No.: _____

Name (as it appears on Credit Card): _____

Exp. Date: _____

Security Code (CVC): _____



Cardholder: _____
(Address, City, State, Zip, Country) _____

Amount, PO: _____

+ Credit Card Fee (6%): _____

Total amount: _____

Currency (please choose):

USD EUR

Date: _____

Authorized signature: _____