

**M.I. HUMMEL COMPANY
CREDIT CARD PAYMENT FORM**

FOR CREDIT CARD PAYMENT, PLEASE MAIL THIS FORM TO:
M.I. Hummel Company, 3705 Quakerbridge Road, Suite 105, Mercerville, NJ 08619
OR FAX COMPLETED FORM TO: (609) 890-4094

PAYMENT DATE: _____

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____

\$ AMOUNT CHARGED: _____

VISA MC AMEX DISC: _____ EXP DATE: _____

SECURITY CODE NUMBER: _____

VISA MC DISC (3 Digits on reverse side of card) AMEX (4 Digits on front of card)

CARDHOLDER'S NAME: _____

CALLED/FAXED/MAILED BY: _____

BILLING ZIP CODE OF CREDIT CARD: _____

INVOICES BEING PAID: _____ REQUEST FOR RECEIPT: YES / NO

| INVOICE | AMOUNT | INVOICE | AMOUNT |
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or Fax to: (609) 890-4094 Attention: Credit Department

PLEASE PRINT CLEARLY