

Credit Card Payment Information

Representative Agency:	Contact Salesperso	n:
Note: 3% service convenience fee is added to to	otal.	
Company:		
Full Name:		
Type of Card: Car	d Number:	
Expiration Date: Secur	rity Code:	
Keep card number on file and use for for	uture orders	
Billing Address of Card:		
Street:	City:	
State: Zip:		
Dollar Amount:	3% Service Charge:	
Total Amount to be Charged:	Purchase Orde	r:
Signature of Authorization:		Date:
Accounts Payable Contact Information:		
Name:		
Street:	City:	
State: Zip:	Phone:	
A/P Email Address:		

Note: All charges will appear on credit card as Zooling Imports LLC.

Remit to: ZLEDLighting 20-B Roland Avenue Mount Laurel, NJ 08054