

# DONMAR ENTERPRISES, INC.

## CREDIT CARD AUTHORIZATION FORM

TYPE or PRINT in ink. Illegible or incomplete applications will be returned. Original or Fax of signed copy must be submitted prior to terms approval.

COMPANY NAME		PHONE #	FAX #
SHIPPING ADDRESS		CITY	ZIP or Postal Code
		STATE or PROVINCE	COUNTRY

CREDIT CARD TYPE: <input type="checkbox"/> Visa		<input type="checkbox"/> MasterCard		<input type="checkbox"/> American Express		<input type="checkbox"/> Discover		<input type="checkbox"/> Debit Card		<input type="checkbox"/> Credit Card	
CARD NUMBER				3 Digit CheckSum#		EXPIRATION DATE		<input type="checkbox"/> Company Card (issued to a business)			
								<input type="checkbox"/> Personal Card (issued to an individual)			
CARD ISSUER/BANK (as printed on back of card)						CARD ISSUER'S PHONE# (printed on back of card)					
CARDHOLDER NAME (as it appears on the card and statements)						CARDHOLDER'S PHONE # (billing address)					
CARD BILLING ADDRESS (where statements are sent)						CITY			ZIP or Postal Code		
						STATE or PROVINCE			COUNTRY		

The Undersigned, individually, as authorized cardholder, and on behalf of the company listed above [Company] warrants that all the above information set forth above is true and complete, and hereby agrees:

(1) DONMAR is authorized to maintain these credit card details on file for the Company, until advised otherwise by the cardholder or an authorized representative. Expiration date updates may be made by phone or fax. Changes to the card details will require a new form to be completed. (2) All charges made to the credit card will be in U.S. Dollars. Any currency exchange fees charged by the credit card issuer will be the responsibility of the cardholder. (3) DONMAR is authorized to charge the listed credit card for all orders placed by phone, fax or email, by any authorized representative of the Company, unless otherwise specified at the time of order. (4) DONMAR is authorized to ship merchandise sold to the Company to an address other than the credit card billing address [where applicable]. (5) to pay all handling and freight charges [where applicable], as specified for each order and printed on the Invoice. (6) to perform the obligations set forth in the Cardholder's agreement with the issuer, and to fully and timely comply with DONMAR's Sales Terms and Company Policies as published in DONMAR's Catalog and printed on the back of each Invoice. (7) the Company agrees to pay a \$25 service charge each time a credit card charge is reversed by the issuing bank, and to pay finance charges of 1.5% per month on all past due amounts, together with costs of collection (including reasonable attorney's fees). (8) In the event of change of ownership of the above named Company, or a change in purchase authorization for the listed credit card, it is the responsibility of the Undersigned cardholder to ensure that DONMAR is properly advised if this information is no longer valid and that DONMAR should no longer maintain it on file.

To induce DONMAR to extend credit card payment privileges to the listed Company, the Undersigned is signing below on behalf of the Company and also in the Undersigned's individual capacity as the cardholder and authorized company representative, that the Undersigned does hereby personally guaranty to DONMAR, full payment and performance of the credit card transaction, in accordance with the Invoice Terms, of all obligations of the Company to DONMAR. The Undersigned will pay all costs incurred by DONMAR (including reasonable legal fees) in enforcing this guaranty.

The Company and the Undersigned, individually, agree: (i) that any litigation arising from this application and/or any transaction between the Company and DONMAR (as well as any action on the Undersigned's guaranty) must take place in courts located in Jacksonville, Duval County, Florida, and (ii) to submit to jurisdiction of such courts and waive any right to object to jurisdiction or venue in any action brought in such courts.

X CARDHOLDER SIGNATURE <small>Signed on behalf of the Company and in my individual capacity.</small>	PRINT/TYPE NAME	DATE
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 TITLE, POSITION or RELATIONSHIP to the Company



- SHADED AREA FOR DONMAR USE ONLY -

DATE REC'D	CUSTOMER #	ENTERED BY	APPROVED	DATE	Updated Expiration Dates
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