BONNIN®
AUDIOVISUAL PLAZA

Credit Approval Form

Forma para Aprobación de Crédito

Para procesar su orden a la brevedad posible, favor de completar el siguiente formulario incluyendo copia de su tarjeta de crédito por ambos lados y licencia de conducir y enviar la forma a nuestro fax (787) 725-0840.

Please fill out form and provide use with copy of your credit card (both sides) and driver's license and return the form to fax (787) 725-0840 so that we may process your order immediately.

Salesperson: _____

CUSTOMER INFORMATION: Date : _____ Ref. # : _____

_____ Acc# _____
Name

_____
Address

_____
City State Zip Code

Telephone : _____ Fax: _____

CREDIT CARD INFORMATION:

Credit Card Type : ☐ Visa ☐ M/C ☐ Amex Expiration Date: _____

Credit Card No.: _____ Licence # _____

Total Amount : _____ _____
Cardholder's Signature

* Cardholder will pay to the issuer of the charge card presented herewith the amount stated hereon in accordance with the issuer's agreement with the cardholder.

Comments : _____

_____

_____

_____ _____
Customer Signature Date