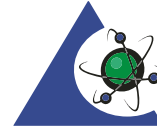




BIO CALIBRATION COMPANY

TRUSTED SERVICE AND COMPLIANCE



**PJLA
Calibration**
ISO/IEC 17025:2017
Accreditation #: 60816

CREDIT CARD AUTHORIZATION FORM

Please provide the information requested below in order to authorize credit card payment for your service.

Contact Name: _____	
Quote # / Work Order#: _____	Amount: _____

CREDIT CARD INFO:

Card Name: _____

Card #: _____ Exp. Date: _____

CVV: _____ Room: _____

City: _____ Zip Code: _____

CREDIT CARD BILLING INFO:

Address 1: _____

Address 2: _____ City: _____

State: _____ Zip Code: _____

Remittance Email: _____

Remittance Phone: _____

Notes/Additional Info:

CONFIRMATION

Credit Card Fee %: _____ Credit Card Fee: _____

Final Amount Charged: _____

(Quoted Amount + 3.5% CC Fee + Sales Tax if Applicable)

Signature: _____ Date: _____

Bio Calibration Company

O: (856) 627-4561 | sales@biocalibrationcompany.com | www.biocalibrationcompany.com

438 Ganttown Road, Suites B6-7, Sewell, NJ 08080