



CREDIT APP - APPENDIX A

By applying for net terms with Integrated Video Supply I hereby agree to pay in full within the terms listed on any invoice any and all purchases made by myself, the company listed below or any of its representatives. If any invoice becomes more than 10 days past due, I hereby agree to have those charges placed on the following credit or debit cards.

PRIMARY CARD (I AGREE TO HAVE THIS CARD CHARGED IF MY ACCOUNT IS OVER 10 DAYS PAST DUE)

CARD TYPE: (circle one) Visa MC AMEX DISC

CARD NUMBER:

EXP DATE:

CVV SECURITY CODE:

NAME ON CARD:

BILLING ADDRESS:

SECONDARY CARD: (I AGREE TO HAVE THIS CARD CHARGED IF MY ACCOUNT IS OVER 10 DAYS PAST DUE AND MY PRIMARY CARD IS DECLINED)

CARD TYPE: (circle one) Visa MC AMEX DISC

CARD NUMBER:

EXP DATE:

CVV SECURITY CODE:

NAME ON CARD:

BILLING ADDRESS:

By signing below I am representing that I am authorized to make purchases on any accounts of _____ and am authorized to approve payment methods on behalf of the same.

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____

PHONE NUMBER: _____

Please provide a photocopy of these cards as well as a photo ID of the authorized person.