



## CREDIT CARD APPROVAL FORM

Please complete the entire form and fax to: **(204) 475-3914** or email [kimz@datcoservices.ca](mailto:kimz@datcoservices.ca).  
 Completion of this form will give **DATCO Electrical Services** the authority and approval to process Credit Card payments as outlined below:

**CUSTOMER NAME:** \_\_\_\_\_

**CARD TYPE:**      (   ) VISA  
                           (   ) MASTERCARD  
                           (   ) AMERICAN EXPRESS

**CREDIT CARD #:** \_\_\_\_\_ **EXPIRY DATE:**    /    /

### Credit Card Holder's Billing Information

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Fax: \_\_\_\_\_ CVC Code: \_\_\_\_\_

Please indicate below invoice number(s) to be processed along with date & amount of payment.

Date:	Invoice #:	Amount:

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<b>First/Last Name (print)</b> <small>(as displayed on Card)</small>	<b>Cardholder's Signature</b>	<b>Date</b>
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Payment confirmation will be sent via email (if provided) or Fax upon completion of transaction(s).  
 Credit Card information will not be stored.