



## Credit Card Payment Information

Name (as it appears on card) \_\_\_\_\_

Credit Card No. \_\_\_\_\_

Billing  
Address \_\_\_\_\_

Billing Phone  
Number \_\_\_\_\_

Credit Card Type \_\_\_\_\_ Expiration \_\_\_\_\_ (3 or 4) Digit Security Code \_\_\_\_\_

Amount Charged \_\_\_\_\_ Date of Service \_\_\_\_\_ Ticket # \_\_\_\_\_

Signature of Credit Card holder \_\_\_\_\_

All accounts paid via credit card are subject to a 2% convenience fee to cover associated costs.

If you the Credit Card holder is unavailable for signature you are authorizing Flat Rate, Inc. to run the following Credit Card number and charge the above amount plus fees to the Credit Card above.

If the following Credit Card is declined or payment is returned all charges and service fees will be billed directly to you. If the invoice is not paid within 45 days the invoice or the account will be turned over to collections.

Please return to Flat Rate, Inc. 14515 485<sup>th</sup> Ave, Big Stone City, SD 57216

Email: [molly@teamflatrate.com](mailto:molly@teamflatrate.com) or [ar@teamflatrate.com](mailto:ar@teamflatrate.com)