



960 Woodland Dr.
 P.O. Box 10
 Saline, Michigan 48176
 734.429.5411
 www.bookprinters.com

Your signature printer

Credit Card Authorization Form

*Please fax completed form to
 Kevin McNab 734.429.8756 or
 Carlene Rogers 734.429.8760*

Customer Name _____ Customer # _____

I authorize McNaughton & Gunn to charge my:

MasterCard, Discover or American Express

(We do not accept Visa)

Card Number: _____

Expiration Date _____ Security Code # _____

(located on the back of the card)

Name on the card: _____

Billing Address: _____ Apt or Suite _____

City _____ State _____ Zip Code _____

For Invoice #, Job # or Title _____

\$ _____ Payment Amount

\$ _____ Plus 3% Convenience Fee

\$ _____ Total Amount to Charge

Signature _____ Date _____

Any questions, please call
 Kevin McNab 734.429.8710
 Carlene Rogers 734.429.8711