



GIFTS 'N THINGS
created to assist you

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Put Your Credit Card On File 30 Day Terms

I _____ hereby authorize Gifts 'N Things to charge my credit card listed below if payment has not been made via check by the due date stated on the corresponding invoice.

Signature: _____ Date: _____

Credit Card Information:

Visa <input type="checkbox"/>	Mastercard <input type="checkbox"/>
Card number: _____	Name on card: _____
Billing Address: _____	City: _____ State: _____ Zip: _____
Exp. date: ___ / ___	Signature: _____