



Credit Card Payment

Job/Invoice #: _____

Payment Amount: _____

Name on Card: _____

Credit Card #: _____

Credit Card type (circle one) VISA / MC / AMEX

Expiration date: _____

CVV code: _____

In signing this form you agree to pay by Credit card the payment amount listed above and a service charge in the amount of 2.5% processing fee for Visa/MC or 3.5% for AMEX

Signature: _____

Date: _____

Gebrüder Weiss Inc
Confederation Parkway 4080, Unit 403
Mississauga ON L5B 0G1
Tel: +1-905-804-1800
Fax: +1.905.804.8700