

PCI SMALL MERCHANT REFERENCE GUIDE ORDER FORM

First & Last Name:			
Title:			
Company:			
Address:			
Email:	7	Phone:	
Ship to address (Please complete this section if s	ship to address is dif	fferent from above	e billing address. We cannot ship to PO Boxes.):
Quantity Information 20–49 (20 is the minimum order amount) 50–100 101–1000 1001+ Customized Co-branded Orders (1000+) Customized Co-branded E-version (PDF) Shipping and handling are in Price per	\$10.50 each \$9.00 each \$7.25 each \$6.25 each \$7.75 each \$125.00	Shipping & handling \$ Included	MOMENT PROTECTION MINIMATERIANS Guide to Safe Payments Version 1.0 July 2016 YOUR LOGO HERE TOTAL INVOICE
If you have any questions, please contact +1-781-To order a custom printed version (orders of 1000-need to supply us with your logo in a print-ready f 300dpi). Please email the logo to pcispeaking@pcPayment Options:	+) or a digital, E-vers file format (such as .a	sion in PDF forma ai .eps, .jpg, .pdf,	
Card Type: DISCOVER DISCOVER	MasterCard	□ VISA	Invoice Me Billing Contact:
Card Number:			
Expiration Date: Billing	g ZIP Code:		Billing Address:
Name on Card:			
Signature:			

Please fax this completed form to +1-781-623-1063*. Thank you.

^{*} This is a secured fax line.