

CREDIT CARD BLANKET TRANSACTION REQUEST

Customer Name:	
Order #:	_Various
Purchase Order #:	_Blanket
Description of Goods:	_Per Request
Card Type: VISA Mastercard	d American Express
Card #:	
3 Digit Validation Code:	(on reverse side of card)
Expiry Date:	(MM/YY)
Name on Card:	
Amount (CDN \$):	Varies Per Request
Transaction Dates (From/To):	
Card Holder's Signature:	
Cardholder will pay the total amount the cardholder agreement with the	ount shown to the card issuer according to e card issuer.
are available on our web site www	ology Inc. terms and conditions of sale which w.sycor.com or from your sales representative. ance of shipping unless otherwise stated.
Please fax back to Accounts Rece	eivable 905-821-7260 or email to dwood@sycor.com.
An official transaction receipt wilto:	ll be mailed with the invoice or emailed