

# Online Market Group, LLC - CREDIT CARD PAYMENT FORM

ORDER NAME:		INVOICE NUMBER:	
AMOUNT TO BE PAID: \$	Monthly Recurring:	YES / NO	DATE:

**PLEASE ENTER ALL INFORMATION AS IT APPEARS ON YOUR MONTHLY CREDIT CARD STATEMENT OR PAYMENT WILL NOT BE ACCEPTED BY OUR MERCHANT GATEWAY ACCOUNT. (PLEASE PRINT CLEARLY)**

NAME:		
COMPANY:		
ADDRESS:		
CITY:	STATE:	ZIP:
TELEPHONE: (AREA CODE)		
CREDIT CARD: (PLEASE CIRCLE ONE) <b>VISA</b> <b>MASTERCARD</b>		
ACCOUNT NUMBER:		EXPIRATION DATE:
CVV2 # (LAST 3 DIGITS ON THE REVERSE SIDE OF YOUR CREDIT CARD):		

I understand that my credit card listed above will be charged and my statement will show that the payment was made to ONLINE MARKET GROUP, LLC.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To FAX this form to us: **Call (904) 272-7538 before faxing.**

MAIL TO: Online Market Group, LLC 410-9 Blanding Blvd #321, Orange Park, FL 32073



**(If you are using this credit card to make an automatic web hosting payment, please make sure to circle the YES in the Monthly Recurring box above.)**

Comments:
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