



**UNIVERSAL
RECORDING SUPPLIES INC**

520 James St. Lakewood, NJ 08701
tel: 732-367-8273 • fax: 732-367-9363

www.universaltapes.com
e-mail: sales@universaltapes.com

This form authorizes Universal Recording Supplies, Inc. to charge you/your company's credit card. Your signing this form represents your acceptance and agreement to the charges for the specified order. Please fax the completed form back to 732-367-9363.

Card Holder Name: _____

Card Type: _____ Card Number: _____

Expiration Date: ___/___/___

CCV Value (Last 3 digits located on the signature strip of the card) _____

(If Known) Quote / Invoice Number _____ Job Name _____

Business Name:

Billing Address: _____

Phone Number: _____

Business Address:(If different than billing)

Order Description:

Signature: _____ Date: ___/___/___