



1101 N. Riverfront Drive • P.O. Box 966 • Mankato, MN 56002-0966
(507) 387-4444 • FAX (800) 658-7171 • E-MAIL dmstamps@stpstamp.com

CREDIT CARD AUTHORIZATION FORM

Company Name: _____ Date: _____
Address: _____ Phone: _____
_____ Fax: _____
Contact: _____
Email: _____

Please complete this authorization form and either email or fax it back to:

Email address: dmstamps@stpstamp.com Fax: (507) 387-4447 or (800) 658-7171

We accept the following Credit Cards: Visa, Mastercard and American Express

Name as it appears on the credit card _____

Full billing address for credit card _____

Credit Card Number: _____

Expiration date: _____ 3 digit security code: _____

Authorized Signature: _____ Date: _____

Do you want us to keep this number on hand and charge all future orders to it? ☐ Yes ☐ No