



3300 WEST MAIN STREET
LANSING, MI 48917
PHONE 517-371-7100 FAX 517-371-2188

CAPITAL DATA, INC

I _____ authorize Capital Data, Inc. to
(name printed)
charge my credit card # _____

expiration date _____ SEC# _____ in the amount of \$ _____ US.

Equipment to be purchased: _____

I understand freight charges will also be charged to my card and the above amount referenced is for goods only. Import duties/taxes will be billed collect if possible, otherwise they will also be billed to my credit card. I understand Capital Data will only ship to the verified address on record for your credit card. My credit card billing address is: _____

I understand that I am responsible for all import duties, taxes and freight associated with this order. It is also understood that once the product has shipped, should I change my mind regarding this purchase or wish to return the product for other than defective, a 35% restock fee will be assessed and will be deducted from the credit to my card. Products have 30 day warranty.

_____ (Signature) _____ (Date)

**Customer Phone# _____
(Please include country code if you know it.)
Customer Fax# _____
Customer Email Address: _____

*******A PHOTOCOPY OF YOUR CREDIT CARD (FRONT AND BACK) IS REQUIRED
ALONG WITH A COPY OF YOUR DRIVER'S LICENSE. REV.04/08**