IMAGEDJ CORPORATION
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CREDIT CARD PAYMENT SHEET

Pay with □Master Card □Visa Card	Date of Purchase	/ /
Credit Card No. (16 boxes)	Expiration Date (mm/yyyy)	/
Signature (as appear on card)	Total Amount (USD) $	USD Rate USD：NTD=
Name on Card (Cap letter)：		
Company：		
Address：		
TEL：	FAX：	
Email：		
The card holder agrees to follow the terms of the credit cards：upon purchase, s/he should pay the total amount as indicated on the bill to the card-issuing bank.		
Remarks：(Purchased items)		
After fill-in this payment sheet, please fax back to：+886-2-2752-8668 Thank you very much for your purchase.		