

IMPORTANT: For best results, download this form and open in Adobe Acrobat to edit. DO NOT COMPLETE THIS FORM USING YOUR INTERNET BROWSER.

Credit Card Information

Our preferred payment method is ACH transfer. 2% surcharge will be applied to all credit card payments.



Payment Information

Company	Cardholder Name	Email
Card Number: Mastercard or Visa Accepted	Expiration Date	Security Code

Billing Information

Check here if Credit Card Billing Address is the same as the "Bill To" on the Séura Sales Order.

Street Address	Suite #		
City	State	Zip/Postal Code	Telephone

Shipping Information (If Applicable)

Same as billing address

Company	Contact Name	Email Address		
Street Address	Telephone			
City	State	Zip/Postal Code	Delivery Services:	Lift Gate (Required for Residential Delivery)
			Residential Delivery	

Authorization

Amount to be Charged	Optional: Séura Sales Order Number
Signature	Date

Keep payment information on file for future orders.

Save and email this completed form to your Séura contact.

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