



465 Amwell Road
Hillsborough, NJ 08844
Phone: 908.428.4700
Fax: 908.428.4701

DATE: _____

CLIENT:

Name: _____

Street Address: _____

City, State, Zip: _____

Phone/Email: _____

Credit Card: Visa MC Amex (please circle one)

PAYMENT AGREEMENT:

The undersigned authorizes JK Design (or JK Print) to debit the credit card noted herein, for up to \$ _____ as payment for ThinkSend email marketing services requested by the Client of JK Design.

Signature & Date

Credit Card Number

Company Name (if any)

Credit Card Expiration Date

Billing Street Address

Credit Card Security Code

Billing State, Zip

Name on Credit Card

Telephone Number