

Beds & Borders, Inc.

600 Laurel Lane

Laurel, NY 11948

631.298.1836

I hereby authorize Beds & Borders, Inc. to charge the credit card listed for any and all charges related to plant purchases, delivery, sales tax, etc.

Company Name: _____

Cardholder Name: _____

Card Type (check one) Amex Visa Mastercard Discover

Credit Card # _____

Expiration Date: _____ Security code _____

Credit Card Billing Address:

City _____ State _____ Zip _____

Authorized Signature: _____

Email Address for Receipts: _____

Email form to: Susan@bedsandborders.com or fax to 631.298.1834