

CREDIT CARD PAYMENT FORM

Company _____

Name _____

Email _____

Telephone _____

Date _____

GR Project #: _____

Amount of payment: _____

Credit Card #: _____

Expiry Date (MM/YY) _____

CCV2 Security Code _____

Credit Card Type (VISA, Mastercard, Amex) _____

Comment _____

Please email completed form to accounting@grpetrology.com