



**To pay by credit card please fill in the following:
We accept Visa, MasterCard and American Express.**

PO # _____

Credit Card # _____

Expiration Date: _____

Name on the Card: _____

Billing Address: _____

Authorized Signature*: _____

Total amount to be charged: _____

***Being the cardholder or Corporate Officer, by signing above I understand and agree to the terms set forth in this agreement, I agree to pay, and specifically authorize Simple Products Corp. to charge my credit card, for the services provided.**

FAX TO 801-553-8887

(All information is kept confidential)

Simple Products Corp.
138 E 12300 South Suite C-165, Draper, UT 84020
tel (801)553-8886 fax (801)553-8887