



Credit Card / Appraisal Order Form

In lieu of my credit card imprint, I, _____, hereby

authorize, **KBishop Funding**, to charge my order to the following Credit Card.

This form must be completed in full and all information must be true and correct in order for payment to be processed

Visa MasterCard American Express Discover

Card Number: _____

Expiration Date: _____

CVV2 Security Code: _____

The billing address as it appears on my credit card statement:

Street Address: _____

Address: _____

City, State, Zip code: _____

County: _____

Email address for receipt: _____

Phone#: _____

By signing below and submitting for payment, I acknowledge acceptance of the Terms and Conditions. I also agree to waive any charge-back rights and in the event of a dispute, requests for a refund must be submitted in writing, along with all order documentation in accordance with standard policy of company issuing credit card. ***Note: Advantage Credit INC will show up as the creditor on your charge card.***

Signature: _____ Date: _____