

DASI Solutions LLC
675 Orchard Lake Rd
Pontiac MI 48341
PH: 248-333-2996
FAX: 517-913-5928 Order Admin



Company Name	_____	Date	_____
Contact Name	_____	Phone number	_____
Company address	_____	Fax	_____
	_____	Reference:	_____
	_____	Sales Person	_____
E-mail	_____		
MasterCard	<input type="checkbox"/>	Visa	<input type="checkbox"/>
American Express	<input type="checkbox"/>	Discover	<input type="checkbox"/>

		Amount	_____
Name as it appears on the card	_____		
Card number	_____		
Expiration	_____	Code	_____

The card holder authorizes DASI Solutions to charge the above credit card for the amount specified.

Date	_____	Card holder signature	_____
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This form needs to be signed and returned to DASI's secured fax number. 517-913-5928
The mailed invoice from DASI Solutions will serve as your receipt.
If you have any questions concerning payment contact **Melissa** @ 248-333-2996 x200
If you have any questions concerning pricing or products contact **Sales** @ 888-327-2974