## MEMRA Credit Card Authorization

Instructions: To pay by credit card, please complete both sections below.

## All Major Credit Cards & Bank Debit Cards Excepted



## **CREDIT CARD INFORMATION**

medtyme.org

Please check credit card type:

(Please Do Not list the 3 digit code on this form; if required we shall contact you immediately by telephone)

☐ Visa □ MasterCard □ Discover □ American Express □ Bank Debit Card □ Debit Card

- 1. You may pay for your products online @ Medtyme.org.
- 2. If you prefer, an admin staff (Only) will complete your purchase online with you.
- 3. Your order is completed online through our website which is secure, accurate and reliable.

Name exact name as it appears on y credit card: \_\_\_\_\_\_

Billing address:	Zip Code:		
Amount to be charged:	\$:		
Cardholder signature:	Date:		
Primary phone number: Cell 🗌 Home 🗌 Wor			
Secondary phone number:	🗌 Cell 🛛 Home 🗆 Work		
STATE ISSUED ID/DL INFORMATION	(For Verification Purposes Only)		
Last Four Digits of DL/ID Number:	State:		
Birth date://	(mm/dd/yyyy) Gender (circle one): 🗆 Female 🗆 Male		

Please complete and fax this credit/debit card authorization to: (702) 920-9200

MEDTYME / MEMRA (Emergency Relief Services) ATTN: Business Office: (702) 987-5527 8430 W Lake Mead Blvd., Suite 100 Las Vegas, Nevada 89128

## **ITEMS REQUESTED**

ACCESSORIES	CLOTHING/OTHER	EQUIPMENT	SUPPLIES