



CISEC, Inc.
P.O. Box 188
Parker, CO 80134
Ph: (720) 235-2783
Fax: 303-841-6386
E-mail: cisec_inc@yahoo.com

PAYMENT FORM FOR SHIRTS AND STICKERS

Name _____ Title _____

Company/Agency _____

Address _____

City _____ State _____ Zip _____

() _____ () _____
Phone _____ Fax _____ Email Address _____

Describe what is being purchased: _____ Size (if applicable): _____

_____ at \$ _____ each = \$ _____

+ Shipping: \$ _____

Date of Purchase: _____

| |
|----------------------------------|
| Enter Total Fees \$ _____ |
|----------------------------------|

Signature: _____

Payment Information: Check VISA MasterCard American Express P.O. No. _____

All checks need to be made out to CISEC, Inc.

Note: Please add \$6.00 shipping for one shirt; add \$1.00 for each additional shirt. Shipping costs for Alaska and Hawaii will vary, please call for amount.



Please fill out the following only if you are paying by credit card

| | | |
|--|-----------------|---------------|
| Credit Card Number | Expiration Date | Security Code |
| Exact name and mailing zip code on the credit card: | | |
| | (Name) | (Zip Code) |
| Authorized Signature | Date | |

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