

**MARYLAND CORRECTIONAL ENTERPRISES  
CREDIT CARD ORDER FORM**

Customer #: \_\_\_\_\_

MCE CO#: \_\_\_\_\_

Date: \_\_ / \_\_ / \_\_

Agency Name: \_\_\_\_\_

Receipt Address: \_\_\_\_\_

Delivery Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ ext. \_\_\_\_

Contact Email: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ ext. \_\_\_\_

Credit Card Spending Limit: \$ \_\_\_\_\_

Credit Card (circle one): Visa or Master Card

Customer Ref.# (optional): \_\_\_\_\_

Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ <sup>Use as PO#</sup> [ - \_\_\_\_\_ ]

3 digit # ( on back of card ) \_\_\_\_\_

Credit card Expiration Date: \_\_ / \_\_

Model #: \_\_\_\_\_ Qty: \_\_\_\_\_ Unit Price: \$ \_\_\_\_\_ Sub. Tot.: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Model #: \_\_\_\_\_ Qty: \_\_\_\_\_ Unit Price: \$ \_\_\_\_\_ Sub. Tot.: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Model #: \_\_\_\_\_ Qty: \_\_\_\_\_ Unit Price: \$ \_\_\_\_\_ Sub. Tot.: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Model #: \_\_\_\_\_ Qty: \_\_\_\_\_ Unit Price: \$ \_\_\_\_\_ Sub. Tot.: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Model #: \_\_\_\_\_ Qty: \_\_\_\_\_ Unit Price: \$ \_\_\_\_\_ Sub. Tot.: \$ \_\_\_\_\_

Description: \_\_\_\_\_

Total Price: \$ \_\_\_\_\_

**Fax to: MCE Customer Service: 410-540-5569**