



Quest Products, Inc.  
8201 104<sup>th</sup> St Ste 200  
Pleasant Prairie, WI 53158

## Credit Card Verification & Authorization Form

Quest Products, Inc. (the "Company") requires submission of this credit card verification form from all customers located outside of the United States who desire to pay for an order with a credit card. This credit card verification form helps us protect you and the Company from credit card fraud. The Company keeps all information on this form strictly confidential.

Please follow these procedures to completed submission:

- 1) Print this form and fill in all required information
- 2) Sign and date (must match signature on credit card)
- 3) Include viewable photocopies of the front and back of the credit card and the driver's license or government issued identification of the person signing this form.
- 4) Upon completion, please fax or email this form and the required materials to Quest Products, Inc. at 262-925-0971 or orders@q3i.com.

Credit Card Number \_\_\_\_\_ Expiration \_\_\_\_\_

I hereby authorize the Company to debit my credit / debit card for all fees for products and services that I am purchasing from Quest Products, Inc.. I understand and agree that should I dispute the credit charge through my credit card issuer or credit provider, it may constitute a breach of contract as well as credit card fraud. I have included signed photocopies of the front and back of my credit card and valid identification as requested above. I understand that this information will be used for the purpose of verification for the credit card. I hereby expressly consent to exclusive jurisdiction in District Court of Buchanan County, Iowa, in the event any dispute related to this transaction takes place. I also acknowledge that the Company shall be entitled to all costs of collection, including attorneys' fees, in the event payment via credit card is not completed in full for the products purchased.

Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_

Dealer Name \_\_\_\_\_

Name on Card \_\_\_\_\_

Billing Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Thank you for helping control credit card fraud