



Spedale's Florist • 110 Production Dr., Ste. 101 Lafayette, LA 70508 337-233-4404 • fax 337-233-4402 Toll free 800-822-3845 • www.spedales.com•tom@spedales.com

Personal Charge Account Application

DATE: _____ EMAIL: _____

LAST NAME: _____ FIRST: _____ M.I. _____

ADDRESS: _____ P.O. BOX: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL: _____ WORK PHONE _____

EMPLOYER: _____ POSITION: _____

EMPLOYER ADDRESS: _____

INDIVIDUALS AUTHORIZED TO CHARGE ON THIS ACCOUNT:

1. _____ 2. _____ 3. _____

CREDIT REFERENCES:

PERSON RESPONSIBLE FOR THE ACCOUNT: _____

CREDIT CARD TYPE: _____ CREDIT CARD # _____ EXP: _____
Verification #: _____ (VISA, MASTER CARD, DISCOVER AND AMERICAN EXPRESS)

TERMS:

NET 30 DAYS. ANY AMOUNT NOT REMITTED WITHIN 30 DAYS FROM THE DATE OF INVOICE SHALL BEAR A FINANCE CHARGE OF 1.5% PER MONTH. ANNUAL RATE OF 18%. IF AT ANY TIME THE ACCOUNT BECOMES 60 DAYS DELIQUENT, THE BALANCE DUE WILL BE CHARGED TO THE ABOVE CREDIT CARD.

SIGNATURE OF PERSON RESPONSIBLE FOR ACCOUNT

DATE

Thank you for choosing Spedale's for your floral needs.



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PAYMENT AGREEMENT FOR NET TERMS

The payment terms for all invoices until approved for a Spedale Charge Account is Cash or Credit Card. If you have submitted a credit application for Net 30 terms we require to have a credit card on file for you. If the payment is 60 days past original Net 30, your credit card will automatically be billed. Please fill out the following information and return with the first page of this application.

Signature

Date

Print Name

Company

Credit Card Number

Exp Date

____ MasterCard ____ Visa ____ American Express