



**Technical
Standards and
Safety Authority**

345 Carlingview Drive
Toronto, Ontario
M9W 6N9

COMPLETE FOR CREDIT CARD PAYMENTS

Please print and fax back this completed form to Upholstered and Stuffed Articles (-9601).

Charge my credit card: VISA MASTERCARD

Amount of Payment \$ _____

Card #

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Expiry Date

Month	Year

In payment of _____ Client ID No. _____

Name of Card Holder _____ Client Tel. No. _____
First Name Last Name

Signature of Card Holder _____ Date _____