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## PAYMENT INFORMATION REQUEST FORM

Thank you for placing an order with *Väska By Annica*.

Please print and completely fill out the following form to ensure timely processing of your order.

**The completed form should be faxed or mailed to the address on this form.**

(Credit card and address information is confidential.)

Company Name: .....

Contact Person: .....

Billing Address: ..... Shipping Address: .....  
..... (if different) .....  
.....

Phone: ..... Fax: .....

(please check one)



Credit Card #: .....



Expiration Date:   /    
(month) (year)

CVC/Security code:

If you prefer a different method of payment or have any questions regarding payment, please contact Annica Magnusson.

Signature: ..... Date: .....