



Payment Information

Please provide us with your billing information by filling out the form below. RecruitScreen requires credit card information in order to fully protect your payment.

Please choose one of the following: (please check)

Please charge the credit card and provide me with a receipt*

RecruitScreen will charge your card for services that you have authorized.

Please invoice me and hold my card number as a guarantee of payment*

RecruitScreen will charge your card if payment has not been received 30 days from invoice date.

Credit Card Information: (please check)

VISA MASTER AMEX DISCOVER

Credit Card Number: _____ **Exp.** _____ / _____

Name of Cardholder: _____ **CVV:** _____

Card Billing Address: _____
Street _____ Suite _____
City _____ State _____ Zip _____

Company Name: _____

Tax ID# or SSN: _____

* Your card number and information will be verified shortly. In order to do so, a credit report or credit information will be accessed.

* If any fraudulent information is found it will be reported to the appropriate agencies immediately.

I hereby agree to the Client Service Agreement which I have signed and submitted to RecruitScreen as well as the terms and conditions listed above. In addition to this, I hereby authorize RecruitScreen to charge the payment according to the choice I made above.

Cardholder Signature: _____ **Date** _____/_____/_____