

DAMILIC Corporation

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Authorization Form to Make Signature Template -MAIL Original Sample to Damilic



Company Name: _____
Contact Person: _____ Telephone: _____
Fax: _____ Email: _____
Shipping Address: _____
City, State, Zip: _____
Billing Address: _____
City, State, Zip: _____
Payment: _____ Invoice _____ Credit Card (Please provide credit card information below.)
Credit Card #: _____ Exp. Date: _____ 3 digit CVV code on back of card: _____
Machine Model: _____ Serial Number: _____
CORRECT SPELLING OF SIGNATURE NAME: _____

Will this be an inverted signature? Yes ___ No ___

(Inverted signatures sign upside down; sometimes needed for oversized documents)

Provide at least three original signatures in the boxes below and indicate your sample of preference.

TIPS FOR A BETTER SIGNATURE REPRODUCTION

- ✓ Try to use the same pen for the samples as will be used on your Autopen. We suggest you use your favorite pen.
- ✓ Do not use period, dots, dashes, or extra marks unless absolutely necessary or it is a part of your signature
- ✓ Occasionally, a feature of a person's signature becomes his/her "icon". If this is the case, please include this information along with any other special instructions.
- ✓ It is important that you sign your signature EXACTLY as you wish to see it reproduced - both Size angle

INDICATE DESIRED SERVICE - Unless checked, We will use the Standard Delivery method.

CHECK ONE (STANDARD OR EXPEDITED)

Standard Delivery for Signature Template

(15 business days)* 9

(M-80 \$195 or PT \$195, plus freight)*

Expedited Delivery for Signature Template

(5 business days)* 9

(M-80 \$245 or PT \$245, plus freight)*

* Each additional word is \$15.

*Highly intricate signatures may require additional fees.

Prices effective July 1, 2013