EZ-NetTools™
Your Solution to the E-commerce Puzzle

INDEPENDENT MARKETING EXECUTIVE

Completion of Services

Personal Information

Name _____

Business Name _____

Address _____ City _____ St _____ Zip _____

Phone _____ Fax _____ Member # _____

Custom Design Description (For Jump Start or Full Service types only)

Work Completed:

-
-
-
-
-
-
-
-
-
-
-

Signature _____ Date: ____/____/____

Comments: _____

Payment Information

Payment Method

☐ Check ☐ Visa ☐ Master Card ☐ Discover ☐ American Express

Name On Card: _____ Total $ _____

Cardholder's Address _____ Paid $ _____

Card Number _____ Code _____ Expiration _____ **Balance Due** $ _____

Cardholder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the issuer.

Signature _____

06-03-02