



SuperbCert[®]
 Super Ideal Hearts and Arrows Diamonds
 Beauty. Value. Education.



SuperbCert Credit Card Processing Agreement

For accuracy **please print clearly** in all fields and then fax to SuperbCert at (212) 302-2453.

Customer's Name as shown on card: _____
 Date of Sale: Month: _____ Day: _____ Year: _____
 Item(s): (Specify brand, size, color, and clarity)

Type of Credit Card: MasterCard: _____ Visa: _____ Amex _____ Discover _____
 Credit Card #: _____
 Credit Card Phone #: (Found on back of credit card) _____
 Expiration Date: Month: _____ Year: _____
 Purchase Amount in US\$: _____.
 Customer Signature: _____
(As it appears on your card)

Credit Card Billing Address

Street Address: _____
 Suite or Apt#: _____
 City: _____ State: _____ Zip Code: _____
 Billing Phone: () _____-_____ Work Phone: () _____-_____
 Email Address: _____

Can we send the receipt to the above address: Yes: ___ / No: ___

Shipping Address

****** IMPORTANT **** Call us to find out how this works (866) 829-8600**

Street Address: _____
 Suite or Apt#: _____
 City: _____ State: _____ Zip Code: _____

How did you find our website? _____

Which Search Engine did you find our site on? _____

Please print this form, complete it and have it notarized by a licensed notary and fax to: (212) 302-2453.

Please include:

- Photocopy, front and back of your credit card with signature.
- Photocopy of valid photo state drivers license or valid state DMV photo ID.
- Names and signatures on both the drivers license/ID card and credit card must match.

All charge amounts drawn in US\$ (United States Dollar). Call us to verify purchase balance prior to submitting this form at (866) 829-8600.