

Credit card order form *

Visa or MasterCard only

To: **Industrial Measurement Systems Ltd. (I.M.S. Ltd.)**
P.O.Box 6305, Haifa, Israel 31062 Email: Sales1@ims.co.il

Name: _____

Company: _____

Full Shipping Address: _____

Phone: _____ Fax: _____

Please charge my credit card for the total amount of: US\$/EU _____

This is to cover our purchase order for _____

_____ + shipping (option)

Visa/MasterCard Number _____

Expiration date: _____

Name of the card holder: _____

I understand that you will charge my card only when the package will be shipped.

Signature: _____ Date: _____

* Please fax this form to: +972-4-8110875 (In Israel) or
Email as an attachment to: sales1@ims.co.il