

-----  
DATE:  
TIME:  
MID:  
TID:  
RECEIPT NO:  
-----

**CREDIT CARD SALE**

-----  
CARD TYPE:  
CARD NUMBER:  
EXP DATE:  
AUTH CODE:  
REF NO:  
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SUBTOTAL  
TAX  
TIP

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**TOTAL**

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CARDHOLDER SIGNATURE

I AGREE TO PAY ABOVE TOTAL AMOUNT  
ACCORDING TO CARD ISSUER AGREEMENT

THANK YOU  
CUSTOMER COPY