



Epoch Analytical Inc.

Unit 100 – 42 Fawcett Road

Coquitlam, BC V3K 6X9

Email: info@ealabs.ca

Ph: (604) 521-6806

GST#: 816263073

Credit Card Approval Form

Date: _____

Company Name: _____

Billing Address: _____

City: _____ Province: _____

Postal Code: _____

Main Contact: _____

Email: _____

Accounts Receivable: _____

Email: _____

Phone: _____

cell: _____

Email Address: _____

Terms: All invoices are payable within 30 days of receipt. Cheques are payable to Epoch Analytical Inc.

Accounting Contact: Accounting1@ealabs.ca or (604) 521-6806 ext. 112

Credit Card Info: Visa MC Other _____

Name on Card: _____

Card #: _____

Expiry

Date: _____

CVV: _____

Signature: _____

Office Use Only:

Comments: _____

EA Lab Code: _____

Approved by: _____