



Fax Payment

To: SOLDbyME.com
Fax #: (314) 732-4215

Pages Including Cover: ____

Contact Information:

Name: _____

Phone: _____

E-Mail: _____

Billing Address:

Street: _____

City: _____ State: _____ Zip Code: _____

Credit Card Information:

Type: Visa Mastercard AMEX Amount to be Charged: \$_____

Name On Card: _____

Credit Card Number: _____

Expiration Date: _____ CSV # (3-digit code on back of card) _____

Signature: _____

Property For Sale:

Street: _____

City: _____ State: _____ Zip Code: _____