ENESCO, LLC
225 Winsdor Drive, Itasca, IL 60143

CREDIT CARD ONLY CUSTOMER FORM

FAX COMPLETED FORM TO: 630-875-5459 ***ATTN: Eileen Moskal***

FROM BUSINESS NAME: _____ **ACCOUNT #**_____

Address _____

City, State & Zip _____

CREDIT CARD BILLING INFORMATION (Full Name on Card)

Name _____

Address _____

City, State & Zip _____

CHARGE MY :

- ☐ AMERICAN EXPRESS
- ☐ DISCOVER
- ☐ MASTERCARD
- ☐ VISA

ACCT # _____ _____ _____ _____

Exp Date: _____ _____
Month Year

SIGNATURE: _____ _____
DATE

PRINT NAME: _____

PHONE NUMBER: _____ **EMAIL ADDRESS:** _____

Would you like to be a Credit Card Only Customer and receive a 2% discount at the time your order is placed?

_____ Yes _____ No

Would you like to sign up for B2B office site (Enesco Self Service Office)? _____ Yes _____ No