



Architectural Drafting & Design
11826 Gardner Park Ln.
Sugarland, TX. 77478

Office: 832-689-3211	FAX: 281-575-0059	EMAIL: cadd@cubewd.com
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CONTACT AND BILLING INFORMATION

COMPANY NAME:
NAME:
ADDRESS:
CITY/ST/ZIP:
HOME #:
OFFICE#:
CELL#:
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WEBSITE:

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SECURITY KEY # ON BACK OF CARD
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Signature below authorizes Cube to withdraw funds from credit card account for payment of services performed. Cube must receive a deposit of half down before starting project and the other half upon completion before file or prints can be released. If for any reason the payment is not made by due date indicated on invoice. Signature authorizes Cube to withdraw funds from credit card account. If client is making payment with check the deposit must clear before starting project. If client agrees to these terms, please sign and Date below.

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