

# Private Lab Results Payment Submission Form

Please indicate method of payment below. **All payments must be in US funds.**

**Money Order - Make payable to: Private Lab Results**

**Check - Make payable to: Private Lab Results**

**Visa, MasterCard, Discovery, American Express**

Charges will appear as **PLR** on your credit card statement

Card number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Verification Value Code (CVV): \_\_\_\_\_ (Code on the back of the card)

Your name as it appears on your card: \_\_\_\_\_

Billing address for card: Street: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

I agree to pay the total amount according to Card Issuer Agreement (Merchant Agreement if Credit Voucher)

Signature of EXACT name on card: \_\_\_\_\_

**Credit card payments will not be processed without a signature**