NEW SWIPER REQUEST FORM

Please use this form for the purchase of net new swipers
New swipers will be quoted and submitted to the requester for approval.

Property or program name:

Date:

CardSpot Web/CardSpot Mobile:

Number of NET new swipers requested:

SHIPPING DETAILS

Requested by:

Phone number:

Shipping address:

Approved by (Property representative):

Name:

Signature:

Return completed forms to: **support@emlpayments.com**