

Card Maximum Exception Request

Promotion Information

PROPERTY OR PROGRAM NAME: _____

DATE: _____

NAME OF PROMOTION & REASON: _____

REQUESTED NUMBER OF CARDS: _____

REQUESTED DOLLAR AMOUNT OF CARDS: _____

DATE AND TIME TO BE ACTIVATED BY: _____

PAYMENT TYPE TO BE USE IN CARDSPOT®: _____

CARD TYPE TO BE USED IN CARDSPOT®: _____

Card Type Example: Regular or Promotional

Card Information

CARD NUMBER	CARD VALUE	RECIPIENT NAME
Please record cards to be activated here:	Record \$ value of each individual card here:	Please record the name of the individual who will receive the card here:

If extra space is needed, please record this information on an additional sheet and submit along with this form.

Purchaser Information

Name: _____

Address: _____

City/Province/Postal Code: _____

Phone Number: _____

ID Type and Number: _____

Card Program Representative

Name: _____

Signature: _____

Fax This Form to Store Financial 866-283-1259