

CREDIT CARD AUTHORIZATION

Date: _____ / _____ / 20_____ Account Manager: _____ Customer Account # _____

Corporate Name: _____

D/b/a: _____

BILLING

Address 1: _____

_____ One Time Charge
\$ _____

Address 2: _____

Address 3: _____

City: _____

_____ Recurring Charge
_____ Charge Upon Delivery

State: _____ Zip: _____

Attention: _____

_____ Do Not Charge Until Approval Issued

Type of Card:    

Account Number: _____ - _____ - _____

Expiration Date: _____ / _____ CCV Code: _____ (3 Digit Code in Signature Line)



Name On Card: _____

Authorized Users of Card:

Name (First,Last): _____ Name (First,Last): _____

Name (First,Last): _____ Name (First,Last): _____

TERMS & CONDITIONS

In signing this form, I _____, the undersigned hereby states that the above described credit card is in my name and that I authorize its use to purchase products and services from All Star Safety & Supply Incorporated and that the total purchases cost will be priced in United State Currency. I authorize the purchase of products, goods, and services from All Star Safety & Supply Incorporated on a continuing basis using the credit cards described herein and the terms described below, unless otherwise instructed in writing by the credit card holder, orders for sold goods are to be placed by representative and employers of the above described company via telephone, fax, computer transmission, in writing or verbally to a All Star Safety & Supply Incorporated staff member.

Signature: _____

Title: _____

Print Name: _____

Date: _____