

Charge Card Authorization



2509 5<sup>th</sup> Avenue South  
Birmingham, AL 35233

Phone: 205/252-0141  
Fax: 205/251-1718

Date: \_\_\_\_\_ (Click on form field to type, then print, sign and fax. Thanks.)

I (printed name) \_\_\_\_\_,

at (card billing address) \_\_\_\_\_

authorize Custom Supply, Inc. to charge my credit card and deliver to address

(name) \_\_\_\_\_

(street address) \_\_\_\_\_

(city, state, zip) \_\_\_\_\_.

I accept full responsibility for payment for goods and services delivered to this address, and understand that special order items may require a nonrefundable deposit and may not be returned, and that no warranty, other than that offered by the manufacturer applies to any item purchased.

I authorize the following employees of my business to place orders using my card (please print names or "None"):

\_\_\_\_\_  
\_\_\_\_\_.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Visa, MasterCard, or Discover Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Charge Card Customer Code: \_\_\_\_\_

(Orders cannot be processed unless all information is provided.)