

SPECIALIZING IN TIMER BOARD & CONTROLS SINCE 1972

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CREDIT CARD AUTHORIZATION

Billing Information	<u>:</u>
Company Name:	
Address:	
City/State/Zip:	
Phone No.:	Fax No.:
Shipping Informat	<u>on:</u>
Company Name:	
Address:	
City/State/Zip:	
Credit Card Inform	ation:
Name On Card:	
Billing Address:	
Card Type:	MasterCard Visa American Express
Card Number:	
Expiration Date:	
CIW No.:	(3-digit code found on back of card)
Acknowledgement	<u>:</u>
By signing below, c sales tax, when app	ustomer agrees to pay all charges associated with their order, included freight and licable.

Card Holder Signature: _____ Date: _____