



## Electronic Supply Company Credit Card/Debit Card Authorization

In order to maintain a credit/debit card on file, please provide the following information:

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Credit/Debit Card Number: \_\_\_\_\_ Sec Code: \_\_\_\_\_

Name of Bank on Card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Type of Card: (MC/Visa/AMEX) \_\_\_\_\_

Numeric Portion of Billing Address: \_\_\_\_\_

Billing Zipcode: \_\_\_\_\_

Print Name on Card: \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_

I \_\_\_\_\_ hereby authorize Electronic Supply Company to charge the above credit card for my daily, weekly, monthly purchases, shipping, or service cost made by me and or my company. This authorization form is intended for use on recurring basis. I request Electronic Supply Company to retain my credit/debit card information on file to accommodate volume purchasing. My purchases are conducted as card not present transaction via telephone, website, fax or internet. My authorization is given as though the physical credit/debit card were present in person. This authorization will remain in effect until Electronic Supply is notified by me in writing to cancel the authorization in such time as to afford Electronic Supply Company a reasonable opportunity to act the cancellation.

Additional Authorized Users/Signatures (Print and Sign):

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

For Internal Use Only  
Account Number \_\_\_\_\_