ISODISC Credit Card Authorization

Legal Company Name Billing address			Trade Name (dba)				
			Description of Business				
City	State	Zip	Organization	Corporation		Partnership	
Main Telephone	F	ax	Years in business	Sole Proprietorship Years at this location N		Non Profit Number of employees	
A/P contact person	P	hone number	Federal ID number	:	Annual	Sales	
Credit card number	F	Expiration date	Name on card		1		
Card type	Visa Mastercard	American Express Discover	Card billing addres	SS	Zip code		
•		y authorizes ISODIS zed by Customer eith	•	•	-		
ODISC's standa ortion of a charge	rd terms and core be declined or	Customers cardholder nditions of sale, incorreversed by a Custon diately pay ISODISC	rporated herein by ner's card issuer f	reference. or any reaso	Should on, incl	any charge or uding Customers	
quest, Customer	agrees to mime.	alately pay 150DISC	the outstanding t	outunee prus	uny ci	iargeouek rees.	
Signature			Print name and title				
Month	<u></u> Date		Year				

Authorization must be signed by the cardholder indicated in the credit card information section