

Credit Card Authorization

Date: _____ ***ALL INFORMATION MUST BE COMPLETED***

I, _____ (Please print your name as it appears on the credit card), do hereby authorize Phillips Plywood Co., Inc. to charge my credit card as follows:

Visa Master Card American Express Discover

Credit Card Number: _____

Issuing Financial Institution: _____

Expiration Date: _____

Last 3 #'s on back of the card (where the white strip is): _____

Credit Card Billing Street Address: _____

City _____ State _____ Zip Code _____

CHECK ALL THAT APPLY:

I authorize Phillips Plywood Co., Inc. to charge my card one time in the amount of: \$ _____.

I authorize Phillips Plywood Co., Inc. to charge my credit card for all purchases until the expiration date of the above credit card (which means Phillips will keep this information on file for all purchases from this customer).

For Your Protection We Are Requiring That You Please Send A Clear Copy Of Your Drivers License and Credit Card So That We Are Able To Confirm Your Signature On The Credit Card To The Driver's License. Thank You.

Signature As It Appears On The Credit Card: _____

FOR PHILLIPS' INTERNAL USE ONLY

Customer # _____ P.T.#'s: _____ Attention: **CASHIER**

Phillips Plywood Co., Inc

Fax #: (818) 897-6571