



PRIME INDUSTRIAL FASTENERS
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Credit Card Authorization Form

Company Name:				
Name on Card:				
Card Type:	Visa ☐	MasterCard ☐	American Express ☐	Discover ☐
Card Number:				
Expiration Date:		CVV2:		
Billing Address:				Zip:
I authorize Prime Industrial Fasteners to charge the credit card above.				
Charge Order / Invoice #:				
Amount to be Charged (\$):				

Print Cardholder Name

Cardholder Signature

Date