



**Store #**

**Phone #**

**Fax #**

To Our Valued Customers:

To better serve you, Moore Supply Company offers the convenience of paying for purchases and / or invoice(s) with your Visa, MasterCard, American Express or Discover. If you would like to use a charge card, we need the following information in order to properly complete your transaction(s). Please complete the sections listed below and fax the completed form to our office at the number listed above.

Sincerely,  
Moore Supply Co

\*\*\*\*\*

**One-time authorization**

Company Name: \_\_\_\_\_ Acct # \_\_\_\_\_

I authorize this company to charge my  Visa  MasterCard  Amex  Discover

for \$ \_\_\_\_\_ on this day \_\_\_\_\_ (date)

Card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Name on Charge card / Credit card: \_\_\_\_\_

Billing address on credit card: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Person Authorizing Charge [Please Print Name]: \_\_\_\_\_

Signature of Authorization: \_\_\_\_\_

[Note: The Signer must be the Cardholder or authorized signer on card.]

Invoice #, order #, or payment info: \_\_\_\_\_

*\* If you are prepaying a purchase, the total amount charged includes product, tax and shipping charges unless your purchase is shipped freight collect.*

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**Ongoing authorization**

Company Name: \_\_\_\_\_ Acct # \_\_\_\_\_

I authorize this company to charge my  Visa  MasterCard  Amex  Discover on an ongoing basis for my purchases/statements/invoices amounts.

Card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Name on Charge Card / Credit card: \_\_\_\_\_

Billing address on Credit Card: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

The following individuals are authorized to use my credit card:

In the event of a dispute, I agree to contact Moore Supply Company to try to resolve the dispute prior to contacting my credit card company.

Person Authorizing Charge [Please Print Name]: \_\_\_\_\_

Signature of Authorization: \_\_\_\_\_