



3324 E. Atlanta Ave. · Phoenix, · AZ 85040
Phone (602) 386-1850 · Fax (602) 386-1851

Credit Card Authorization

Required Information:

Customer Name _____ Invoice # _____

Billing Name _____

Billing Address _____

Credit Card Address _____
(if different from billing address)

Telephone # _____

1. Type of Card _____
2. Name as printed on Card _____
3. Card Number _____
4. Expiration Date _____ 3 Digit Pin# _____

LETTER OF AUTHORIZATION

_____ I authorize Alliance Industrial Service & Sales to charge my credit card to pay invoice or invoices listed above only.

_____ I authorize Alliance Industrial Service & Sales to charge my credit card to pay invoice or invoices listed above plus any future charges ordered via phone or in person. I will be notified verbally of invoices being charged to my credit card.

AUTHORIZED SIGNATURE _____

DATE _____

RETURN TO FAX# (602) 386-1851 or
Accounting: lsalter@alliance-ind.com

Thank You!