



Credit Card Authorization Form

*Please fax this form to 214.631.3673 or email to orders@republic-mfg.com

PO # or Order #

Company Name

Account Type

Visa

Mastercard

AMEX

Credit Card Number

Expiration Date

CVV Code

Name on the Card

Billing Address for Card

City/State/Zip

Shipping Address:

City/State/Zip

Phone Number

Email address for invoice

YES NO

Will this account be Tax Exempt?

(if exempt from tax please provide copy of form. Applicable for shipments to Texas and California only)

Will your shipping account be used for purchases?

If so, please provide Agency and account number.

[Empty box for Agency and account number]

SIGNATURE _____

DATE _____

I authorize the above-named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above, plus any necessary shipping fees if the customer's shipping account is not applicable. This authorization form is valid for one time use only, unless specified by the customer to use for any future orders. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

5131 Cash Road, Dallas, Texas 75247

Toll free: 1.800.847.0380 | Local: 214.631.8070 | Fax: 214.631.3673 republic-mfg.com