

Viking Manufacturing Inc. (VMI)
Credit Card Authorization Form

Company Info

Company Name _____
Street Address _____ Billing Address (For Card) _____
Phone _____
Fax _____ Email _____

Card Info

Company Card or Personal Card (Circle One) COMPANY PERSONAL
Type (Circle One) VISA MASTERCARD
Credit Card Number _____ - _____ - _____
Expiration _____ Card ID Number (3 Digits on Back) _____

Sales Orders

Job Name _____ Invoice or P.O. _____
Job Name _____ Invoice or P.O. _____
Job Name _____ Invoice or P.O. _____
Job Name _____ Invoice or P.O. _____
Job Name _____ Invoice or P.O. _____
Job Name _____ Invoice or P.O. _____

WE HEARBY AUTHORIZE THE RELEASE OF CREDIT CARD INFORMATION TO VMI. WE CERTIFY THAT THE INFORMATION ABOVE IS CORRECT AND COMPLETE.

SIGNATURE _____ **PRINTED NAME** _____ **DATE** _____

Please fax back to 609.645.3218