



**CREDIT CARD AUTHORIZATION | FORM NO. 4-2014**

Customer Acct #: \_\_\_\_\_ Customer P.O. #: \_\_\_\_\_ Date: \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Ordered By:** \_\_\_\_\_ **AMOUNT U.S.\$** \_\_\_\_\_

Credit card information: **AMEX** \_\_\_\_\_ **MASTERCARD** \_\_\_\_\_ **VISA** \_\_\_\_\_

**ACCT.** \_\_\_\_\_ **Expiry Date** \_\_\_\_\_ / \_\_\_\_\_

**CVV2 3VISA/MC-4AMEX** \_\_\_\_\_ **Issuing Bank:** \_\_\_\_\_

**Card Member's Name:** \_\_\_\_\_

**Credit Card Billing Address:** \_\_\_\_\_

**ZIP CODE/CP** \_\_\_\_\_

Check one:  Authorized for this purchase only  Please keep on file for future orders

**Card Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PLEASE FAX BACK SIGNED FORM TO: (305) 393.8111**

Card member authorizes THE ENG GROUP LLC to debit above listed credit card for all charges including freight and sales tax as referenced on above mentioned purchase order. Furthermore, card member authorizes THE ENG GROUP LLC to ship product to the specified location on the attached purchase order, if different from above listed billing address.

**FOR ACCOUNTING USE ONLY**

PRE-AUTHORIZATION

Sales Order #: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Confirm. #: \_\_\_\_\_

Date: \_\_\_\_\_

By: \_\_\_\_\_

POST-AUTHORIZATION

Shipper: \_\_\_\_\_

Invoice #: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Date: \_\_\_\_\_

By: \_\_\_\_\_