

YOUR COMPANY NAME: _____

FloMoCo Quote Reference Number (if applicable): _____



5627 Commerce Drive
Orlando, FL 32839
Web: <http://www.flomoco.com>



Florida Motion & Control
Tel: 407 851-3536
FAX: 407 859-6821
Email: sales@flomoco.com

Credit Card Authorization Form

Please complete, sign and FAX back to 407 859-6821. For the protection of the credit card holder, orders cannot be placed until this completed form is received and credit card verification with card issuer has successfully passed.

Type of credit card: (AMEX, MasterCard, Visa): _____

Credit Card Number: _____

Expiration Date: _____

CVV Code: (3 digits on back for MC & Visa)
(4 digits on front for AMEX) _____

Credit Card Issuer Customer Service Phone #: _____
(on back of card)

Name on Credit Card: _____

If Ship To Address is the same as Bill To Address, then please enter "SAME" in Ship To Street 1.

Bill To Street 1: _____ Ship To Street 1: _____

Bill To Street 2: _____ Ship To Street 2: _____

Bill To City: _____ Ship To City: _____

Bill To State (Province): _____ Ship To State: _____

Bill To Zip (Postal) Code: _____ Ship To Zip: _____

Bill To Country: _____ Ship To Country: _____

I hereby state that I am authorized to place charges against the credit card provided above. I also authorize Orlando Hose & Fluid Power and Florida Motion & Control to place appropriate charges against this card for merchandise ordered by myself or designated person(s). Appropriate charges shall include the quoted price(s) for merchandise and all associated shipping, handling, duties and taxes.

Name: _____ (printed)

Signed: _____

Date: _____