

Date: Customer No.: Salesperson:

## **CREDIT CARD AUTHORIZATION FORM**

Credit Card Type:				
	Visa		MasterCard	
Cardholder's Name:				
Credit Card Number:				
Expiration Date:				
CVV (code on back of card):				

I authorize Simcoe Gases Inc to charge the above credit card for the agreed upon purchases within my agreed payment terms. I understand that my information will be saved on file for future transactions on my account.

Signature of Cardholder: \_\_\_\_\_Date: \_\_\_\_\_Date: \_\_\_\_\_