



CREDIT CARD AUTHORIZATION FORM

I hereby authorize Tony's Wholesale Supply, LLC. to keep information pertaining to my credit card on file and to debit any purchases I have made automatically unless otherwise requested at the time of purchase. I understand that a statement of my account will be mailed or e-mailed to me with my credit card receipt(s) attached.

I agree to pay for any additional services I have approved or requested. I acknowledge that I am responsible for any and all outstanding amounts on my Tony's Wholesale Supply account if my credit card company declines payment.

Credit Card Information

Account Name: _____

Card Type (please circle): VISA MASTERCARD AMEX DISCOVER

Credit Card Number: _____

Expiration Date: _____ Sec Code: _____

Name on Card: _____

Signature: _____

Phone Number: _____

Email: _____

Billing Address:

Street Address: _____

City: _____

State, Zip: _____