



Credit Card Charging Authorization Form

(Please complete the following and fax back to us)

Attention: _____ Date: _____

Your Company: _____

I, _____, hereby authorize Antares Enterprises to charge my credit card of Purchase Order Ref. _____ and ship my order to the following address:

SHIP-TO INFORMATION

Name: _____

Street: _____

City: _____

State: _____ Zip Code _____

CREDIT CARD INFORMATION

Type of card: ___ Visa ___ Mastercard ___ American Express

Account Number: _____ - _____ - _____

Expires: ____/____

CVV: _____ (3 Digit Number Behind Card)

Issuer of card: _____

CARDHOLDER INFORMATION

Name: _____

Street: _____

City: _____

State: _____ Zip Code: _____

Total (Excluding Shipping Costs) \$ _____

Freight Option: ___ GROUND ___ 3 DAY ___ 2 DAY ___ OVERNIGHT

Authorized Signature: _____