

1993 Tellepsen St., Houston, TX 77023 ph.: 713.926.1136, fax: 713926.3110, toll-free: 800.327.7424 www.intechbearing.com

Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us.

This authorization will remain in effect until cancelled.

Credit Card Information				
Card Type:	☐ MasterCard	□VISA	\square AMEX	
			_	
State:		Cardholder ZIP):	
	(mm/yy):			
CCV Code (3 digits Visa / MasterCard, 4 digits AMEX):				
I,, authorize Intech Bearing, Inc. to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.				
Customer Sign	ature		Date	