

AUTHORIZATION FOR AUTOMATIC CREDIT CARD CHARGE

(A Division of The Andwin Corp.)

Please return form to: The Andwin Corp A/R Department-Credit Card 167 W. Cochran Street Simi Valley, CA 93065 Phone: (818) 999-2828

Phone: (818) 999-2828 Fax: (818) 226-4125

SALES REPRESENTATIVE:						
OLIOTOMED INIE	DDMATION /	D. D. O				
CUSTOMER INFO	JRMATION (Please Print)				
			Anderson Bremer Paper	r Account #:		
Customer Legal Name:			Contact Person:			
Customer DBA Nan	ne:		Phone:			
Address:			Fax:			
City:	State:	Zip:	Email:			
CREDIT CARD IN	IFORMATION	V				
		VISA	☐ Mas	ter Card		
Card Number:			Expiration Date:		CVC#	
CREDIT CARD B	ILLING INFO	RMATION				
Cardholder Name:			none:			
Address:			Fax:	C:		
City:	State:	Zip:	Email:			
I (we) authorize Anderson Bremer to initiate charges to the credit card account indicated above. I understand that only Anderson Bremer will have access to my credit account information. By signing this portion of the form, I authorize Anderson Bremer Paper to initiate an automated charge of the named account. This authority is to remain in full force and effect until Anderson Bremer has received written notice of it's termination in such time and manner as to afford reasonable opportunity to act upon the notice. I (we) understand I (we) have the legal right to stop payment of an automated charge entry by notification to Anderson Bremer in such time and manner as to afford reasonable opportunity for Anderson Bremer to act prior to charging the account. For a complete listing of our terms and conditions please visit the web at www.abp-andwin.com. If an overdue invoice remains unpaid and Anderson Bremer is unable to get a response on payment, Anderson Bremer reserves the right to utilize the information on this page for payment.						
Signature:			Print Name:			
	(by an authorized a	pent)				
Title:			Date:			
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NOTE: The charge may appear as Andwin Corp on your credit statment.