

INDUSTRIAL PLASTICS SUPPLY CO.
P.O. Box 210, West Orange NJ 07052
PHONE: 212 226 2010
FAX: 212 226 2015
INDUSTRIALPLASTICS@GMAIL.COM
CREDIT CARD AUTHORIZATION FORM

Date: _____ Attention: _____

I, _____, hereby authorize Industrial Plastics to charge my:

- _____ Master Card
- _____ Visa
- _____ American Express
- _____ Discover

In the amount of \$ _____

CARD #: _____

Expiration Date _____ CCV# _____ (Visa/MC/Discover-3 digit # on back of card)

(AMEX-4 digit on front)

Signature _____

Name as it appears on the front of the credit card (please print):

Billing Address: _____

City _____ State _____ ZIP _____

Phone #: _____ Cell Phone #: _____

Delivery Address: _____

City _____ State _____ ZIP _____

Phone #: _____ Cell Phone #: _____

(Please include a photocopy both sides of your credit card in the return fax)

Please list your order with as much detail as possible: