

**CREDIT CARD AUTHORIZATION FORM
LETTER OF AUTHORIZATION TO CHARGE CREDIT CARD**

I authorize Strand Import & Distributors Inc. and divisions thereof to charge to the following described credit card the amount due for purchase of products and services. Once you have completed this credit card authorization form, please fax the signed copy back to Strand Import at (843) 236-8228. Your order/transaction cannot be completed until this signed document is on file.

PLEASE VERIFY YOUR CARD NUMBER: Along with this signed agreement, please also fax us a photocopy, front and back of your credit card, with the card bearer's name and number showing clearly.

Card Holder's Name On Card: _____

Corporation / Business Trade Name: _____

Select type of card Visa MasterCard American Express

Card Number: Expiration Date:

Card Verification Number: (Security Code) _____

Cardholder's Contact Information, including billing address: (Billing Address for Credit Card)

Street Address: _____

Suite/Apt. No.: _____

City: _____

State/Province/District: _____

Country: _____ **Zip Code:** _____

Billing Address Phone: _____ **Alternate Phone:** _____

Billing Address Fax: _____ **Alternate Fax:** _____

Email Address: _____ @ _____

By this credit card document I hereby give my complete approval to pay in full for all purchases which I order and charges I authorize with Strand Import & Distributors Inc.

Signature: _____

Printed Name: _____ **Date:** _____

Strand Import & Distributors Inc.
P. O. Box 16530
Surfside Beach, SC 29587
Phone: 843-236-8666

Fax: 843-236-8228