



## Credit Card Authorization Form

I authorize Northern Log Supply, LLC to charge my credit card below.

**Customer's Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, & ZIP: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Credit Card Information:**

Card Type:     Visa             MasterCard             Discover             American Express

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Cardholder's Name (as it appears on card): \_\_\_\_\_

**Payment Amount:**

Invoice / Estimate Number: \_\_\_\_\_

Amount to charge to credit card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please fax the completed form to 810-746-0098**