



Janitorial - Foodservice - Packaging - Office - Safety

Dutch Hollow Service & Supplies Inc.

6218 Old Saint Louis Road
Belleville, IL 62223

IL: 618.236.1553 / MO: 314.621.1194 / FAX: 618.236.2730

www.dutchhollowsupplies.com

CREDIT CARD AUTHORIZATION

Date: \_\_\_/\_\_\_/20\_\_\_ Account Manager: \_\_\_\_\_ Customer Account # \_\_\_\_\_

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

D/b/a: \_\_\_\_\_

BILLING

Address 1: \_\_\_\_\_

One Time Charge \$ \_\_\_\_\_

Address 2: \_\_\_\_\_

Address 3: \_\_\_\_\_

City: \_\_\_\_\_

Recurring Charge \_\_\_\_\_ Charge Upon Delivery

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Attention: \_\_\_\_\_

Do Not Charge Until Approval Issued

Type of Card: [Radio] MasterCard [Radio] VISA [Radio] DISCOVER NETWORK [Radio] AMERICAN EXPRESS

Account Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_/\_\_\_ CCV Code: \_\_\_\_\_ (3 Digit Code in Signature Line)



Name On Card: \_\_\_\_\_

Authorized Users of Card:
Name (First,Last): \_\_\_\_\_ Name (First,Last): \_\_\_\_\_
Name (First,Last): \_\_\_\_\_ Name (First,Last): \_\_\_\_\_

TERMS & CONDITIONS

In signing this form, I \_\_\_\_\_, the undersigned hereby states that the above described credit card is in my name and that I authorize its use to purchase products and services from Dutch Hollow Services & Supplies Incorporated and that the total purchases cost will be priced in United State Currency. I authorize the purchase of products, goods, and services from Dutch Hollow Services & Supplies Incorporated on a continuing basis using the credit cards described herein and the terms described below, unless otherwise instructed in writing by the credit card holder, orders for sold goods are to be placed by representative and employers of the above described company via telephone, fax, computer transmission, in writing or verbally to a Dutch Hollow Services & Supplies Incorporated staff member.

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

Title: \_\_\_\_\_

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

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