



# Imaging Resources

Imaging Resources requires a completed authorization form in order to process a credit card order. Please complete the authorization form below and fax it and mail the original for our records. This information will be kept confidential and will help us to process all future telephone and fax orders.

## CREDIT CARD AUTHORIZATION FORM

I, \_\_\_\_\_, of \_\_\_\_\_  
(Name of Officer) (Name of Company)

do hereby authorize Imaging Resources to debit my credit card as Indicated:

VISA    MASTERCARD    AMERICAN EXPRESS    DISCOVER

for all orders submitted.

Card Number: \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name on Card: \_\_\_\_\_

\_\_\_\_\_  
(Card Holder Billing Address) (Telephone Number)

\_\_\_\_\_  
(City, State, Zip Code) (Fax Number)

SIGNED: \_\_\_\_\_ DATE \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_

Additional people (if any) who are authorized to enter orders with this credit card are:

(Please give printed name and signature)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Imaging Resources reserves the right to charge an additional 3% fee if this credit card is used to pay for any invoices that are delinquent.

**Web: [ir-usa.com](http://ir-usa.com) e-mail: [irinfo@earthlink.net](mailto:irinfo@earthlink.net)**

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