



# Customer Setup & Credit Card Authorization Form

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Billing Address

\_\_\_\_\_  
Shipping Address (if same as billing you may leave blank)

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
E-mail Address ( for all correspondence)

I AUTHORIZE SUPPLY BRIGHT OF FLORIDA THE USE OF CREDIT CARD ACCOUNT NUMBER BELOW TO COVER ANY ORDERS AND SHIPPING AMOUNT FOR THE DATES SPECIFIED.

Circle One      **AMEX**      **VISA**      **MC**      \_\_\_\_\_

Other

Yes     No     Call First

Ok to charge balance when ready to ship

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

\_\_\_\_\_  
Billing Address of credit card (if same as billing address above you may leave blank)

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Exp. Date

\_\_\_\_\_  
Security ID# on back of card

\_\_\_\_\_  
Project Name / Order Number

I understand by signing this credit card authorization form below, charges will be charged to my credit card and no reversal charge backs are allowed and I am responsible for payment of these charges made to Supply Bright

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

Please fax completed form to Supply Bright at 844-780-0910 or E-mail to [Sales@SupplyBright.net](mailto:Sales@SupplyBright.net)

Voice - 844-448-3207      fax: 844-780-0910  
Web Site: [www.SupplyBright.net](http://www.SupplyBright.net)      E-Mail: [Sales@SupplyBright.net](mailto:Sales@SupplyBright.net)