



Customer Credit Card Authorization

COMPANY NAME: _____

BILL TO ADDRESS: (surcharge of 3% may apply if bill-to address does not match the current billing address of card)

(Street) (City/state/zip)

SHIP TO ADDRESS: Same as Above: **(YES / NO)**

(Street) (City/state/zip)

CONTACT INFORMATION:

EMAIL ADDRESS: _____ FAX #: _____

DAYTIME PHONE #: _____ EVENING PHONE #: _____

CREDIT CARD INFORMATION:

PRINT CARD HOLDER'S NAME: _____ CARD NUMBER: _____

EXPIRATION DATE: _____ LAST 3/4 DIGITS FROM BACK OF CARD: _____

I AUTHORIZE FINETEC COMPUTER TO CHARGE MY **(VISA/MASTER CARD/AMERICAN EXPRESS/DISCOVER)** CREDIT CARD FOR AN ORDER VIA- TELEPHONE, FAX, AND/OR EMAIL:

FOR THE SUBTOTAL OF: _____ FREIGHT CHARGES: _____ TAX: _____
IF APPLICABLE (SURCHARGE MAY APPLY)

**No cash refunds. Returns will not be accepted without prior approval and/or valid RMA #

SIGNATURE OF CARD HOLDER: _____

PLEASE CIRCLE METHOD OF SHIPPING: **(NEXT DAY/ 2-DAYS/ 3-DAYS/ GROUND/Pick Up)**

PLEASE LIST ITEMS AND QUANTITIES HERE:

Note: Please attach a copy of the resale certificate when sending back the credit application. Thank you!

Address: 2075 Zanker Road, San Jose, CA 95131, USA

sales@finetec.com www.finetec.com

Phone: 408-943-9193 Fax: 408-943-9198