



CREDIT CARD AUTHORIZATION

I hereby authorize, _____, HyTech Associates Sales Company, Inc (dBa HASCO, INC), to charge my
Company Name

_____ for services performed on the following invoices:

Credit Card Type

Invoice Number	Invoice Amount

☐ CHARGE ALL INVOICES

Authorized Signature: _____ Date: _____

Customer Name: _____ Customer ID: _____

Customer Phone/Fax/E-mail: _____

Bill to Information (please complete billing/invoice address)			
Name on Credit Card:			
Credit Card Number:			
Expiration Date:		Sec. Code:	
Card Type:	<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover		
Customer Address:			
City, State, Zip:			
Attention to Name:			
Ordered By:			