

CREDIT CARD AUTHORIZATION AGREEMENT



The amount of the charge is to be	(pending contract acceptance by TMS) PLUS shipping and tax, if applicable.
If there has been a quotation prepared for this order, please indicate the quote number:	
NAME AS IT APPEARS ON CARD	les Team Member. Please have card number, expiry, and security code available when calling.*
CREDIT CARD TYPE U VISA	☐ MasterCard ☐ American Express ☐ Discover
Billing details for card (where statement is sent)	Shipping details
COMPANY NAME ADDRESS	COMPANY NAME ADDRESS
CITY STATE	CITY STATE
ZIP	ZIP
CONTACT NAME CONTACT PHONE	CONTACT NAME CONTACT PHONE
CARDHOLDER EMAIL	REFERENCE PO OR PROJECT NUMBER (OPTIONAL)
Please indicate how shipping charges are to be handl PRE-PAY AND ADD TMS can prepay and VOUR SHIPPING ACCOUNT Carrier	
Indicate additional notes or special shipping instruc	ions here (ex. broker information)
I hereby authorize The Modal Shop, Inc. to ship prod	ucts to the address listed, and charge the credit card for the entire rental duration.
CARDHOLDER SIGNATURE	FORM FILLED OUT BY

*Please note that the charge will appear on card as "PCB Piezotronics", our corporate parent who process and administer our card payment system.

Please return this completed form via fax (+1 513-458-2172) or e-mail (sales@modalshop.com). Thank you!

