



**H.H.H. TEMPERING RESOURCES, INC.**  
 11500 Miramar Parkway, Suite 300,  
 Miramar, Florida 33025-5807  
 Phone: **954 441 5057** Fax: 954 441 5059  
 Web: <http://www.hhhtempering.com>  
 email: [info@HHHTempering.com](mailto:info@HHHTempering.com)

7016 N.E. 40<sup>th</sup> Avenue, #100  
 Vancouver, Washington 98661  
 Phone: **360 993 5644** Fax: 360 9931272  
 Email: [info@HHHTempering.com](mailto:info@HHHTempering.com)

< **Manufacturing Facilities** >

2330 Greensburg Road  
 New Kensington, PA 15068  
 Phone **724 640 9972**  
 email: [info@HHHTempering.com](mailto:info@HHHTempering.com)

**CREDIT CARD AUTHORIZATION FORM**



**TO: HHH TEMPERING RESOURCES INC.**

**FROM:**

COMPANY NAME: \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

COMPANY CONTACT NAME: \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

SENDER'S FAX NUMBER: \_\_\_\_\_

**CREDIT CARD AUTHORIZATION**

I authorize the billing of all transactions incurred at "Company Name" to the credit card listed below. I agree to all terms and conditions set forth by HHH TEMPERING RESOURCES, INC. and understand that ALL SALES ARE FINAL unless otherwise stated.

By signing this agreement, I relinquish the right to dispute the charge.

TYPE OF CREDIT CARD: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

CARD EXPIRATION DATE: \_\_\_\_\_ V-CODE (3 digits for Visa & MC, 4 digits for AMEX): \_\_\_\_\_

TOTAL AMOUNT TO BE CHARGED: \$ \_\_\_\_\_

INVOICES TO BE APPLIED: \_\_\_\_\_

CARD HOLDER'S NAME AS IT APPEARS ON THE CARD: \_\_\_\_\_

CREDIT CARD BILLING STREET ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP CODE: \_\_\_\_\_

BILLING TELEPHONE NUMBER: \_\_\_\_\_

**NAME OF AUTHORIZED SIGNATORY:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_