

**Credit Card Information**

**Please Note: Credit Card authorization must be received and approved before pickup of property will be allowed. Fraudulent use of credit cards will result in recommendation for debarment from the DLA Disposition Services Sales Program.**

If a credit card is to be used, complete the following information and fax this completed page to 269-961-7230.

(Please type or legibly print information)

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Card Holder Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City/State/Country/Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Ext.** \_\_\_\_\_

\_\_\_ **Master Card**                      \_\_\_ **Visa**                      \_\_\_ **Discover**                      \_\_\_ **American Express**

**Card Number:** \_\_\_\_\_

**CV2# (Security Code)** \_\_\_\_\_ **Expiration Date: Month** \_\_\_\_\_ **Year** \_\_\_\_\_

**I (we) authorize the DLA Disposition Services collection office to obtain payment by credit card for:**

**Contract Number** \_\_\_\_\_

**Amount Authorized for Payment:** \_\_\_\_\_

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

\_\_\_\_\_  
**Date**

