



**Essex Sales &
Distribution Group, Inc.**

Your Premier Window Covering Supplier

Credit Card Authorization Form

If you are set up with Net 30 day terms and if Essex Sales & Distribution Group Inc. has not received payment within 45 days of the date of any invoice made out to the above company, then they reserve the right and will be allowed to charge the card(s) belonging to this company or owner(s) of this company for the full amount owed on the invoice(s). All orders are subject to credit hold if any invoices are past the due date.

Credit/Debit Card Type: MasterCard Visa Discover American Express

Credit Card Number: _____

Expiration Date: _____

Security Code: _____

Cardholder's Name as it appears on the Credit Card: _____

Billing address of Credit Card:

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

I/We agree to furnish Essex Sales & Distribution Group, Inc. with credit card changes as necessary.

Authorization to charge credit/debit card if necessary is hereby given by:

Print Name: _____

Signature: _____

Position: _____