

ATLAS CRANE SERVICE

14818 Midland Rd., Poway CA 92064

Ph: 858.748.6956

Fax: 858.486.0749

Credit Card Authorization

I, _____ (name), of _____
(name of company if applicable), hereby authorize Atlas Crane Service, Inc. to charge
against my credit card listed below in the amount of \$_____.

Type of card:

Visa

Mastercard

American Express

Name on card: _____

Billing address: _____

City: _____ State: _____ Zip Code: _____

Credit card number: _____

Expiration date: ____/____ Security code: _____

Invoice #(s) being paid:

# _____	\$ _____	# _____	\$ _____
# _____	\$ _____	# _____	\$ _____
# _____	\$ _____	# _____	\$ _____
# _____	\$ _____	# _____	\$ _____
# _____	\$ _____	# _____	\$ _____

Total to charge: \$ _____

Authorized Signature: _____ Date: _____

Printed Name: _____

If you would like a receipt faxed or emailed to you please provide your

Fax # () _____ - _____ OR

Email address _____