



420 Crystal Beach Avenue, Suite 532
Crystal Beach, Florida 34681
727.784.6828

E-mail back this completed form to: credit@silico.com & your sales representative.

CREDIT CARD AUTHORIZATION

Dear Customer:

In order to safely process your credit card order, we ask you to please complete the following information and attach a copy of the front and back of your credit card. Also, as credit cardholder, by signing below, I hereby waive "charge back rights" unless the parts are defective or not delivered.

Issuing Bank Name & Phone #:

Type of credit card:

V#:

Credit Card Number:

Exp.Date:

Credit Card Holder Name/Company Title:

Credit Card Billing Address: (cc bill to must match ship to)

By signing this form, I hereby authorize Silico Systems, LLC to charge against my credit card in the amount of \$ _____

Plus shipping & sales tax (if applicable) \$

In reference to our purchase order #:

Authorized Signature: _____

Print Name of Cardholder: _____

Date: _____

Controller or Authorized Company Signature _____

Print Name of Company Signer: _____

Print Title of Company Signer: _____

C/C Auth Rev. Date: _____

Note: All credit card purchases will be assessed a 3.5% transaction fee.