

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 Sale Program.

If a credit card is to be used, complete the following information and fax this completed page to:

269-961-7230

First Name: _____ Last Name: _____

Company Name: _____

Card Holder Name: _____

Street Address: _____

City/State/Country/Zip Code: _____

Email address _____

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 officer to obtain payment by credit card for:

Contract number: _____ Sum Bill # (If Applicable) _____

Type of Payment (Escrow, contract, partial) _____

Amount Authorized for payment: _____

Authorized signature

Date