

H. Winter and Company, Inc.

Importer and Distributor of Designer Tile

610-434-4500

890 N. Gilmore St.

Allentown, PA 18109

Credit Card Authorization

☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Company Name: _____

Cardholder Name: _____

Credit Card Number: _____

Verification Code (last 3 or 4 digits on panel): _____

Amount: _____

Expiration Date (month/year): _____

Billing Address: _____

Phone Number (associated with credit card): _____

Being the Cardholder of Corporate Office, by signing below I understand and agree to the terms set forth in this agreement, agree to pay and specifically authorize to charge my credit card, for the services provided by H. Winter and Co.

Signature: _____ **Date:** _____

Printed Name: _____

Please fax completed form to 610-434-7909.