

FORMULA HYBRID / PROGRESSIVE X-Prize
CREDIT CARD AUTHORIZATION FORM

CREDIT CARD # _____ **TYPE** _____

EXP DATE: _____

Order Amount ___ \$ 0.00 _____

Shipping: ___ \$25.00 _____

Sales Tax: ___ \$ 0.00 _____

AMOUNT: ___ \$25.00 _____

NAME ON CC: _____

Customer/Team name: _____

ADDRESS: _____

City: _____ State: _____

ZIP: _____

Phone # _____ Fax# _____

CLERK

SALES ORDER# _____

TOTAL TAX _____

PRESENT

CVC# _____

Customer: _____

Attn to: _____

Ship to address: _____

Address: _____

City: _____ State _____ Zip _____

Phone # _____ Fax# _____

AUTHORIZATION # _____
CUSTOMER: _____ **SO#** _____

Item 1: *IR155-2* **Qty:** *1* **Unit Price:** *0.00*
_____ \$ _____

Ship Via: *UPS Ground (if not otherwise spec.)* **Account#:** _____

Notes:

Submit this form to:

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