



GARLAN CHAIN COMPANY INC.
 1903 COUNTY ST, P.O. BOX 3186 ATTLEBORO, MA
 Phone 508-399-7288 Fax 508-761-8720

CREDIT CARD AUTHORIZATION FORM

Company Name: _____

Please Check One:

Am Ex

Master Card

Visa

Discover

Card # _____

Expiration Date _____

Verification # (this can be found on the back of your card) _____

Card Holder Name (Company) _____

Card Holder Name (Person) _____

Billing Address for Card _____

I, _____, am the authorized card holder and
 authorize Garlan Chain Company, Inc. to charge the above stated credit card.

 Signature

 Date

****PLEASE COMPLETE THIS FORM AND FAX BACK TO 508-761-8720****

