



Payment authorization by credit card

Date: _____

To: _____

Address: _____

Phone: _____ Fax: _____

Attention: accounts payables or: _____

From : DAC INDUSTRIAL

Contact : Accts Payable

Phone : (902) 468-3765 or 1-877-468-3765

Fax : (902) 468-3897

| Ref. Invoice (s) # | Amount | |
|--------------------------------|--------|----|
| _____ | _____ | \$ |
| _____ | _____ | \$ |
| _____ | _____ | \$ |
| Total authorised amount | _____ | \$ |

To cover the payment of invoices listed above and for the total amount only,
We authorised you to debit: _____ \$ Visa _____ Master card _____

Card # : _____ Expiry: _____

Card holder name (Print letters): _____

Complete shipment only Partial shipment accepted

Card holder signature: _____