



Spicers Paper

ACCOUNT # _____
(Spicers use only)

SPICERS PAPER, INC

CREDIT CARD USE AUTHORIZATION FORM

Limited – Must sign new release and return to Spicers prior to each charge

I, _____, authorized cardholder for _____ CREDIT
CARD number _____ Security Code # _____, which expires
_____, do hereby authorize Spicers Paper, Inc. to charge a purchase not to exceed \$ _____.

Name as it appears on Credit Card Billing address of specified Credit Card

Cardholder understands and agrees that credit card transactions are "net" and have no provision for discount.

Signed: _____



Unlimited – to be kept as a blanket release for any Spicers order charged to CREDIT CARD

I, _____, authorized cardholder for _____ CREDIT
CARD number _____ Security Code # _____, which expires
_____, do hereby authorize Spicers Paper, Inc. to charge a purchase not to exceed \$ _____.

Name as it appears on Credit Card Billing address of specified Credit Card

Cardholder understands and agrees that credit card transactions are "net" and have no provisions for discount.

Signed: _____

PLEASE FAX BACK TO (562) 464-6004