



**SOUTHERN ELEVATOR
& ELECTRIC SUPPLY**

CREDIT CARD PAYMENT AUTHORIZATION

(VISA, MC, AMEX only)

Email or Fax to AR@SEESINC.com or 954-917-7337

Date: _____ Customer #: _____

Company Name: _____

Contact: _____

Phone: _____

Name on Credit Card: _____

Credit Card Number: _____

Card Verification #: _____

Expiration Date: _____

Billing Address: _____

I authorize S.E.E.S. Inc. /dba-Southern Elevator & Electric Supply, to keep the above Visa, MasterCard, American Express card on file to charge at their discretion upon my verbal authorization.

A receipt/Invoice will be emailed to me and the charge will appear on my credit card statement.

Cardholder Signature: _____

Print Name: _____

Authorization# (for SEES use) _____