



**empirePRO**  
Distributor of Pro Audio, Video & Lighting

# CREDIT CARD AUTHORIZATION

Empire Wholesale Inc. 5675 Mansfield Way, Bell CA 90201  
Tel (213) 748-5200 Fax (213) 748-5505 www.empirepro.com

I AUTHORIZE **EMPIRE WHOLESALE, INC.** TO CHARGE MY CREDIT CARD FOR THIS PURCHASE MADE. I UNDERSTAND THIS FORM IS VALID UNLESS I CANCEL THE AUTHORIZATION THROUGH WRITTEN NOTICE TO **EMPIRE WHOLESALE, INC.** BY CERTIFIED MAIL.

MASTERCARD     VISA     DISCOVER     AMEX

CREDIT CARD # \_\_\_\_\_ EXPIRES \_\_\_\_/\_\_\_\_ CSV \_\_\_\_\_

COUNTRY WHERE CARD WAS ISSUED \_\_\_\_\_

I UNDERSTAND THAT MY SIGNATURE ON THIS CONTRACT WILL SERVE AS MY AUTHORIZED SIGNATURE ON THE CREDIT CARD SLIP

\_\_\_\_\_  
NAME ON CREDIT CARD

\_\_\_\_\_  
COMPANY NAME

\_\_\_\_\_  
BILLING ADDRESS OF CREDIT CARD

\_\_\_\_\_  
CITY, STATE, ZIP CODE

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
FAX NUMBER

Being the cardholder or Corporate Officer, by signing below I understand and agree to the terms set forth in this agreement, agree to pay, and specifically authorize Empire Wholesale, Inc. to charge my credit card, for the products provided. Empire Wholesale, Inc. will provide me with an Invoice statement detailing all of my charges. Returned goods or cancelled orders are subject to 25% restocking fee.

\_\_\_\_\_  
AUTHORIZED CARD HOLDER'S SIGNATURE

\_\_\_\_\_  
DATE

Please fax signed & completed form directly to the credit department secure fax number 213-748-5505