



7350 S. Kyrene Road, Suite 104
Tempe, Arizona 85283

CREDIT CARD AUTHORIZATION FORM

The Below Signed hereby authorizes Kangaroo Manufacturing, Inc. (“Kangaroo”) to initiate charges to the credit card account indicated below.

Please fill in credit card type, name of cardholder, authorized signature, credit card expiration date, as well as the credit card code (three to four digit code found on the back of the credit card), and credit card billing address. Kangaroo will receive and debit such entries to Subscriber credit card account identified below.

1) Company Name: _____

2) Credit Card Account Number: _____

3) Cardholder’s Name (exactly how it appears on the card): _____

Credit Card Billing Address: _____

City: _____ State: _____ Zip Code: _____

4) Credit Card Type: Visa _____ Mastercard _____ Discover _____ American Express _____

5) Credit Card Expiration Date: _____ Credit Card Code (CVV): _____

Unless the Credit Card Authorization Form is properly revoked by Cardholder, any rejected Credit Card transactions will incur a processing fee of \$25 per offense.

WHEREAS, Cardholder hereby authorizes Kangaroo Manufacturing, Inc to debit Cardholder’s credit card account for amounts due and payable to Kangaroo.

Cardholder Name: _____

Title: _____

Authorized Signature: _____ Date: _____

I understand that this authorization will remain in effect until it is cancelled in writing, and I agree to notify Kangaroo Manufacturing, Inc. in writing of any changes in my account information or termination of this authorization. I certify that I am an authorized user of this credit card and will not dispute these transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form.

Please fax or email this form along with a copy of your Business License or W-9 form as follows:

Attn: Madison Roman
Fax: 480-718-8700
Email: newaccounts@kangaroomfg.com