



WINTER HAVEN OFFICE
5131 Recker Highway
Winter Haven FL 33880
863.965.8788 Phone
863.967.6235 Fax

BELLE GLADE OFFICE
1281 South Main Street
Belle Glade FL 33430
561.996.6746 Phone
561.992.4391 Fax

info@ssipetro.com

CREDIT CARD AUTHORIZATION

RE: _____

DATE: _____

I hereby authorize SSI Petroleum, Inc. to charge my Credit Card for each individual order placed by

_____.

This authorization will stay in place until otherwise stated in writing by _____.

A copy of the credit card authorization will be faxed to fax number _____ after each transaction.

NAME ON CARD: _____

CARDHOLDERS ADDRESS: _____

TYPE OF CARD: VISA MasterCard American Express

CREDIT CARD NUMBER: _____

EXPIRATION DATE: ____ / 20____

SECURITY CODE: _____

PLEASE SIGN BELOW TO AUTHORIZE SALE.

CARDHOLDER SIGNATURE

PRINTED NAME