

**INTERNATIONAL KITCHEN SUPPLY**  
**864-638-4372**  
**864-638-4376 FAX**

**CREDIT CARD SETUP AUTHORIZATION FORM**

I authorize International Kitchen Supply to charge the credit card listed below for Invoice (s) as I approve them and issue instructions to *charge card on file*.

Company Name \_\_\_\_\_

Name on Credit Card \_\_\_\_\_

Billing Address for Card \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Card Type:    VISA            MASTERCARD            AMEX            DISCOVER

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Code (3 digit Visa & MC, 4 digit AmEx) \_\_\_\_\_

I am giving International Kitchen Supply permission to keep this credit card information on file.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**