



**INDUSTRIAL TESTING LABORATORY SERVICES, LLC**  
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### **Credit Card Authorization Form**

Today's Date: \_\_\_\_\_

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

Cardholder Name: \_\_\_\_\_

Card Billing Address: \_\_\_\_\_

Type of Card: \_\_\_\_\_

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

Exp. Date: \_\_\_\_\_

CVV Code: \_\_\_\_\_

Amount\*\*: \_\_\_\_\_

\*\*Please remind customers that there is a fee of 5% of the total being charged.