

Swink-Quality Oil and Gas 203 West Broad Avenue Rockingham, N.C. 28379 (910) 997-3101 FAX (910) 895-7476 Quality-Oil and Gas 17600 Andrew Jackson Highway P. O. Box 949 Laurinburg, N.C. 28353 (910) 276-6045 FAX (910) 277-0269

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Quality-Oil and Gas 1512 West Fifth Street Lumberton, N.C. 28358 (910) 739-7446 FAX (910) 739-0371

Credit Card Authorization Form

INSTRUCTION authorization fo	S: Print or type entries clearly. Carefully read and complete the entire rm.
Credit Card Int	formation:
Type of card:	(Circle one) Visa Mastercard
Ca	rd Number:
The CVV is the la These numbers s It is a 3 or 4 dig	n Value (CVV) for VISA or Card Validation Code for MASTERCARD ast 3-digits of the number in the signature block on the back of the card. should be different from the last three digits of the card number. git code located on the reverse side of the card: ration Date: Month Year
Cardholder Nar	me:
Cardholder's Si	gnature
Mailing Address	s: (Street Address, Apt. #)
	(City, State, Zip Code)
Phone Number	:
immediately no withdrawn, discuseless it is agr	that by signing this "Credit Card Authorization" form that it is our responsibility to tify Quality Oil and Gas Company if the above credit card has been revoked, ontinued or made unusable for any reason. In the event charge card is rendered reed that a replacement card must be immediately supplied. Furthermore this form Quality Oil and Gas Company to use the charge card for one or more of the nents:
2. If a Credit A	will be billed to the above credit card. Account is approved it is understood that an unpaid balance, past 30 days, may be above unless other arrangements are made.
Accepted By:	Company:Signature
Name & Title:	Date:
	Fax or email this completed form to Quality Oil and Gas Company Fax: (910) 895-7476 Email: ljurczyk@qualityoilandgas.com
Office use:	
Date received:	Customer Account#