

Credit Department

REMIT TO: P.O. BOX 532875
ATLANTA, GA 30353-2875

Phone: 713.378.3902 - Credit

Phone: 281.452.0709 - Sales



CREDIT CARD AUTHORIZATION / APPROVAL

FROM: _____ DATE: _____

TO: arikg@harsco.com salesikg@harsco.com
(Credit Department) (Sales Department)

CREDIT CARD INFORMATION

(TO BE COMPLETED BY CUSTOMER OR ON CUSTOMERS BEHALF)

_____ VISA _____ MASTERCARD _____ AMERICAN EXPRESS

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____ SECURITY CODE: _____
(3 or 4 DIGIT # ON BACK OF CARD)

CARD HOLDERS NAME: _____

CARD HOLDER ADDRESS: _____
Address, City, State, Zip Code

AUTHORIZED AMOUNT TO CHARGE: _____

AUTHORIZED BY: _____
(CUSTOMER'S SIGNATURE -OR- AUTHORIZED NAME)

****CUSTOMER EMAIL RECEIPT TO****

(CUSTOMER EMAIL ADDRESS)

IKG ORDER INFORMATION

(TO BE COMPLETED BY SALES/CREDIT DEPARTMENT)

CUSTOMER NAME: _____ Acct #: _____

IKG ORDER NUMBER: _____ INVOICE NUMBER: _____

IKG QUOTE NUMBER: _____