

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled or line of credit has been approved via the credit application.

Please note there is a **3% processing fee** that will be applied to this purchase order.

Send this form to [orders@emergenseelight.com](mailto:orders@emergenseelight.com). Be sure to save this file for your records.

**Credit Card Information:**

**PO#:** \_\_\_\_\_

**Card Type:**    VISA             MasterCard             Discover             AMEX  
  
 Other \_\_\_\_\_

**Cardholder Name (as shown on card):** \_\_\_\_\_

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

**Expiration Date (MM/YY):** \_\_\_\_\_      **SEC Code:** \_\_\_\_\_

**Billing Zip Code:** \_\_\_\_\_

I, \_\_\_\_\_ authorize EMERGENSEE/PROLITE LED LIGHTING to charge my credit card above for agreed upon purchases including all freight charges associated with this purchase order. I understand that my information will be saved to my account for future transactions.

**Customer Signature:** \_\_\_\_\_      **Date:** \_\_\_\_\_