



# Credit Card Authorization

FEDERAL ID TAX: 31-1696715

*Please note: Credit card orders are subject to the following service handling fees: Visa or MasterCard: 3%. Sorry, no other credit cards accepted.*

I, \_\_\_\_\_, authorize KOST® USA, Inc. to charge said credit card as directed below:

Credit Card Type		Visa	MasterCard				
Credit Card #		Security Code					
Expiration Date		Account #					
Billing Address		City		State		Zip Code	
Name on Card			Phone				
(As it appears on card)							
Email Address							
(A sales confirmation for pricing approval will be sent to this address)							

Keep the Credit Card on File

Do Not Keep the Credit Card on File

Signature (required)		Date	
Name Printed			

**This application will NOT be processed without a signature!**

**Please attach a copy of your Company Credit Reference Sheet, W-9 Form and Sales Tax Exempt Certificate**

**Please return completed form to Accounts Receivable:  
f: (513) 492-5555 or e: [accountsreceivable@kostusa.com](mailto:accountsreceivable@kostusa.com)**



1000 Tennessee Ave. Cincinnati, OH 45229  
(800) 661-9391 | [kostusa.com](http://kostusa.com)



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