## Dick Vaiea & Assoc. an Alliance Partner with Beltram Foodservice Group

134 Latonea Drive Columbia, SC 29210 (800) 545-8714 (phone) (803) 731-8254 (fax) 6800 N. Florida Avenue Tampa, FL 33604

## **Credit Card Authorization Form**

I,	, hereby aut	thorize DVA/Beltram Foodservice	Group, to
charge my credit card account:	For the amount of current or	rder placed  In the amount of \$_	
( ) VISA ( ) MasterCard	( ) American Express	( ) Discover	
Credit Card Number:		Security Code	:
Credit Card Billing Address:			
Street:			
City:	State:	Zip:	
Telephone: ( )			
<b>Shipping Address:</b>			
Store Name:			
Street:			
City:	State:	Zip:	
Telephone: ( )			
As the credit card holder, I hereby	y authorize receipt of goods &	k services at the shipping address a	ıbove.
Cardholder's Signature		/	
As the credit card holder, I also au purchases.	nthorize DVA/Beltram Foodse	ervice Group to charge my credit ca	ard for future
Authorization Valid Until:/	Initials Her	re:	
**		1	1

Your completion of this form helps us to protect you, our valued customers, from credit card fraud. DVA/Beltram Foodservice Group will keep all information entered on this form strictly confidential.