



TIM'S CRANE & RIGGING, INC.

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CREDIT CARD AUTHORIZATION

NAME ON CARD: _____

AUTHORIZED USER: _____

CREDIT CARD #: _____ EXP. DATE: _____

BILLING ADDRESS FOR CARD: _____

CHARGE AMOUNT: \$ _____

SIGN: X _____ DATE: _____

ATTN: _____

Please fill out form and fax back to me and upon your approval we will run the charge.

Thank You