

Wirelesslink Group Inc

22 W 27th Street New York NY 10001

www.wirelesslinkgroup.com

Credit Card Charge Authorization Form

*All New Customers Must Provide This Information

*Company Name: _____ *Contact Name: _____

*Mailing Address: _____ *E-Mai: _____

*Telephone Number: _____

*Sales Rep _____

ALTERNATE SHIPPING ADDRESS (IF DIFFERENT FROM BILLING)

Credit Card Charge Authorization

Card Number: _____

Exp. Date: _____

The last three securities No (on the back of card): _____

Card Holders Signature: _____

Billing address: _____

Resale No: _____

%o

Visa %d Master

Personal Card %d Corporate Card

IF YOU PREFER TO USE THIS CREDIT CARD FOR ALL FUTURE ORDERS, PLEASE COMPLETE THE FOLLOWING:

I, _____, AUTHORIZE THE WIRELESS LINK GROUP INC. TO USE THE ABOVE REFERENCED CREDIT CARD ACCOUNT FOR ALL FUTURE ORDERS.

CARDHOLDER SIGNATURE/ CHARGE AUTHORIZATION: _____

DATE AUTHORIZED: _____

*Please attach the Card Holder valid picture ID