

Type of Card:	Visa	Mastercard	American Express	Discover
Credit Card Number (Last 4 digits only) _____				
Exp. Date _____		***Please call 813-835-3883 x232 to disclose your full CC# & CVC Code		
Name as it appears on Credit _____				
Card: Company Name: _____				
<u>Credit Card Billing Information</u>				
Address: _____				
Address 2: _____				
City: _____		State: _____	Zip Code: _____	
Phone: _____		Email: _____		
Cardholder's Signature _____				
I, the above signed hereby states that the above described credit card is in my name and that I authorize its use for purchase from Direct Components, Inc. Total purchase cost will be priced in United States Currency. A 3% non-refundable convenience fee for non-standard terms)				

Future Orders: I authorize this card to be left on file for all future orders placed by representatives and employees of the above described company.* Yes No

*Credit Card numbers entered are secured via Secure Sockets Layer (SSL) 128 bit encryption for your protection.

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Direct Components in writing of any changes in my account information or termination of this authorization at least 5 days prior to the agreed Ship Date on the Sales Order Confirmation. I certify that I am an authorized user of this credit card and will not dispute these transactions or credit card company; so long as the transactions correspond to the terms indicated in this authorization form.

Please Complete All Required Information and Email to both ar@directics.com; orders@directics.com

Your completion of this authorization form helps us to protect you, our valued customer, from credit card fraud.
All information entered on this form will be kept strictly confidential.

5439 Beaumont Center Blvd., Suite 1040, Tampa, FL 33634 USA / 1-888-723-7279 / info@directics.com / directics.com