



MARATHON EQUIPMENT INC.

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Credit Card Authorization

Please fill the following form on the computer.

Date:

I authorize **Marathon Equipment, INC** to charge:

Cardmember Name:

Expiration Date Cardmember Account #

Security Code:

Billing Address:

Amount of Charges:

I agree to pay the total amount shown above in compliance with the cardholder agreement.

(Authorized Signature)

Please print, sign and fax this form back to (305) 591-1944
Thanks you for doing business with us.