



*Ready Mix*

*Box 1765 601-114th St. North Battleford, SK S9A 3W2  
Telephone: 306-445-8511 Fax: 306-44-1512*

**CREDIT CARD AUTHORIZATION**

**DATE :** \_\_\_\_\_

**Company Name :** \_\_\_\_\_

**Contact Name :** \_\_\_\_\_

**Mailing Address :** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**E-Mail Address :** \_\_\_\_\_

**Phone Number :** \_\_\_\_\_ **Fax Number :**

\_\_\_\_\_

**Legal Description of where services are required:**

\_\_\_\_\_

\_\_\_\_\_

**CREDIT CARD INFORMATION**

**Credit Card Type :** VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_

**Exp. Date:** \_\_\_\_\_ / \_\_\_\_\_

**Security Code:** \_\_\_\_\_ *mm / yr*

**Is this a one-time Authorization:** \_\_\_\_\_

**Can this card be kept on file for future use:** \_\_\_\_\_

**Do you want all your invoices automatically processed on this card:** \_\_\_\_\_

*\*\*\* G&C Ready Mix, a Division of CCCL are authorized to use my credit card for all products, services, taxes and fees as specified above.*

\_\_\_\_\_

**Print Name of Credit Card Holder (as it appears on the card)**

\_\_\_\_\_

**Signature of Credit Card Holder**