CHAMPION PRODUCTS CORP. | CREDIT CARD AUTHORIZATION

Ι,	_ (Please Print Name) authorize Champion Products Cor	p. to charge my
Credit Card listed below on behal	f of:	(company name)
C. In C. IT		
Credit Card Type:		
Credit Card Number:		
Billing Address:		
Expiration Date:		
3 Digit Security Code (found on be	ack of card)	
Authorized Name on Credit Card:	·	
Amount Authorized: \$		
If you are paying for a specific inv	roice, please indicate invoice number:	
made by the Company name noted above	rstand that this agreement represents the expressed authorization to charge my . It is further understood and agreed that this document may be accepted vials, whether originals or replicated through facsimile or internet, shall be con	a facsimile or internet
Signature:		

PLEASE SIGN AND RETURN BY FAX TO:

WINDSOR

2601 Wyandotte Street, East, Windsor, Ontario N8Y 0A5 Tel: 519.252-5414

Fax: 519.252-5030

Toll Free: 1.855.CHAMPRO

TORONTO

140 Great Gulf Drive, Vaughan, Ontario L4K 5W5 Tel: 289.695.3900 Fax: 289.695.0020

Toll Free: 1.800.407.6188

DETROIT

2030 Howard Street, Detroit, MI 48216. U.S.A P: 313.963.1669 F: 519.252.5030

Toll Free: 1.855.CHAMPRO