



WHERE **RELIABILITY** IS GUARANTEED

**Corporate Office:** P.O. Box 231 • 1290 N. Hobbie • Kankakee, IL 60901-0231  
**Phone** 815/936-4700 **Fax** 815/932-7484

**Branch:** 8770 Springlake Dr. • Mokena, IL 60448-8957  
**Phone** 708/479-4660 **Fax** 708/479-4663

**Branch:** 711 Ladd Street • Pontiac, IL 61764-0796  
**Phone** 815/844-6345 **Fax** 815/842-1424

## Credit Card Payment Authorization Form

I authorize Gordon Electric Supply, Inc. to debit my card in the amount of US DOLLAR \$ \_\_\_\_\_

for: \_\_\_\_\_

Invoice/Order #: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Credit Card Details

Type of Card: ☐ Visa ☐ Master Card ☐ Amex ☐ Discover

Cardholder's Name (as stated on card): \_\_\_\_\_

Card Number: \_\_\_\_\_

Cardholders Billing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Security Code/CVV code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please email this completed authorization form to [ar@gordonelectric.com](mailto:ar@gordonelectric.com)

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