



ACI AQUACULTURE

3010 North Frontage Rd
Plant City, FL 33565

813-704-5980 Office

813-434-2238 Fax

www.aciaquaculture.com

CREDIT CARD AUTHORIZATION FORM

UPDATE INFORMATION

CANCEL AUTHORIZATION

*Check if applicable

PAYER INFORMATION (PLEASE PRINT)

Name of person authorizing payment:

Name of Business (hereafter "Accountholder"):

Business Address:

City: State: Zip:

CREDIT CARD ACCOUNT INFORMATION (PLEASE PRINT)

Cardholder Name (exactly as it appears on the credit card hereafter "Cardholder"):

Credit Card Billing Address:

City: State: Zip:

Credit Card Type (please check one): MasterCard Visa Discover

Credit Card Number:

Expiration Date: / VID Code (3-digit code on back)

PAYMENT AUTHORIZATION:

By completing and executing this form, the cardholder acknowledges and agrees that ACI Aquaculture Inc. (hereafter "Company") is authorized as of the authorization date set forth below and subject to the terms and conditions set forth below, to charge the credit card, debit card, charge card or other payment card (each referred to herein as "credit card", specified above for the amounts billed to the accountholder or the cardholder specified above for products shipped.

Company will send the accountholder or cardholder an invoice for products shipped. Company will charge the above credit card for the amount specified in the invoice up to 24hrs prior to shipment. Cardholder acknowledges that they will continue to be liable for any rejected or unpaid charges including all penalties. Cardholder further authorizes Company to initiate a charge or credit as necessary to correct any prior overpayment or underpayment of any invoice or any other charge or credit effected under this or prior authorization(s). Company and cardholder further acknowledge that if this payment authorization for a future charge, then Company will send the accountholder or cardholder an Invoice for products shipped indicating amount charged. Cardholder further acknowledges that all sales are final and that no deductions will be made without written Company authorization and approval.

If you have any questions, please contact ACI Aquaculture; Tel: 813-704-5980 Fax: 813-434-2238

Signature of Cardholder: _____

Authorization Date: _____