



10441 NW 28 St. – Suite A105,
Miami, FL. 33172, USA
E-mail : fernando@silmicro.com

CREDIT CARD AND SHIPPING AUTHORIZATION

To process your order with your credit card, please fill out this form entirely. Please fax/e-mail to us together with copies of the following documentation:

- 1.-Copy of picture I.D. (Passport, valid US Driver’s License, Valid State I.D.)
- 2.-Copy of credit card (front and back)

Business Information (All fields required)

Business Name (As in incorporation Documents) _____
 E-mail Address (To send receipt) _____
 Business Street Address & Number: _____
 City: _____ State: _____
 Zip Code: _____ Country: _____
 Telephone Number(s): _____ Fax: _____

Credit Card Information

(Please select one with an X) VISA MASTER CARD DISCOVER AMERICAN EXPRESS

Cardholder’s Name as it appears on Card	Telephone No.
Credit Card Number	Expiration Date
Cardholder’s Billing Address (if different from Business Address.)	
Security Code (Three digits back of card)	

Shipping and Freight forward authorization

Name	Telephone No.
Company Name	
Address	
City	State
Zip	Country

I hereby authorize Sil Micro Corp. (Silmicro / Sil Micro / silmicro.com) to debit the card indicated above per completed instructions. I certify that I am the cardholder & I am fully responsible for this credit card account. I further authorize shipment to be made to an address other than my billing address (if applicable). Signing this form also indicates that I have read and understand the terms of sales on the Proforma Invoice. Should it become to place this account for collection, suit or other legal proceeding, the undersigned agrees to pay all costs and expenses of collection, suit or other legal action, including a reasonable attorney’s fee and, if necessary, appellate fee. Venue shall be Miami-Dade County, Florida, United States of America

Name: (Please Print): _____ Signature: _____
 Amount: _____ Invoice/Quote # _____ Date: _____