

War Eagle Mill

Date: _____

Name: _____

Company Name: _____

Card Type : _____ Amount to charge to card: _____

Card Number : _____

Expiration date: _____ CCV 3 digit security code from back _____

Cardholder Name on the card: _____

Item reference or invoice numbers: _____

****I authorize War Eagle Mill, Inc to charge my credit/debit card for the above amount.
Cardholder sign below and return document to Finance.***

Card Holder Signature

Date

***For faster ordering process, we offer to keep your credit information in a secure file.
If you authorize War Eagle Mill, Inc. to retain your credit card information on file for
future orders please write below on the line. "Please keep card on file", Thank you.***

"Please keep card on file"

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