

Marco Specialty Steel, Inc.

P.O. Box 750518 Houston, TX 77275 Ph: 713-649-5310 Fax: 713-649-5305

Email: ar@marcospecialtysteel.com

⇒ Must complete every section of agreement to be valid 🗢

CUSTOMER CREDIT CARD AGREEMENT

The following information is a Cardholder's Name:Company Name:Customer Name (if different) Credit Card Billing Address: Customer Telephone Number	:			
☐ American E	xpress	over Card 🔲 Ma	asterCard	☐ Visa
→ Last Four Digits Only of C	redit Card Number:	Sec	curity Code*: _	
The undersigned hereby ackno (a) MSS is authorized and card for Invoice No./ S (b) MSS is authorized and above referenced credit (c) If other payments arrang up to the remaining bala (d) The authorization provic (e) All shipments are F.O.B (f) Nothing herein shall affer of MSS, this credit card (g) See below for additiona	I directed to charge ales Order No. / Pur directed to charge all card (please initial) gements have not becance within 60 days orded herein is valid, irrect the enforceability cagreement being in a	\$chase Order Nofuture invoices untilYESen made, MSS may f the invoice date. evocably binding and Houston TX 77075 of any personal guar	MSS is otherw NO. additionally cha	ise notified in writing on arge this credit card for ancelled.
Authorized Signature (Same	e as Cardholder)		Date	
I/we agree that MarCo Specialty Sorder. All such charge(s) and order that (1) all past due amounts shall be necessary to hire a collection attended to the account for which I/we or related to any matter which is the federal courts located in Harris Co the laws of the State of Texas, with agreements with my issuing bank claims resulting in charge back of	er(s) is/are irrevocably bear interest at the maxionney, reasonable attorned agree to pay; (3) any are subject of this agreementy, Texas; (4) this agrout regards to its conflicted agree to waive all refunds from my issuing of	binding and may not be mum legal rate of 18% ney's fees of at least and all disputes arising ent shall be subject to reement shall be gove ct of laws rules; (5) I/w ights to file disputes we redit card company ar	pe cancelled by to per annum; (2) in 10% of the balant under or in confusive jurierned by and confusive waive all right with my credit cannot on the cannot of the cannot	me/us. Further, I/we agree in the event that it becomes ince due and costs will be nection with this agreement isdiction of the state and/or instrued in accordance with a according to cardholders and company and waive any
\times \times _Customer to fill out this section.	For the customers priv	_	<i>X</i> by.	
Please specify method of partican Express	_	<u> </u>	teel, Inc. ("MS	Same day shipments - will bring
Full Credit Card Number:				credit card
Expiration Date:*last 3 digits on back of card in	 n signature area or Ame	Security Code*: rican Express is 4 digi	its on front of car	to Marco to swipe