

HILCO UNITED SERVICES - Propane CREDIT CARD DRAFT AUTHORIZATION FORM

Name(s):		
(As it appears on you	ır bill)	
Home Phone: ()		_ Business Phone: ()
Address:		
City:	State:	Zip Code:
HILCO U.S. Account Number	r(s) to be paid by	y draft:
Credit Card, please check one	: () Mastercard	d () Visa () American Express
Name as it appears on your cr	edit card:	
Credit Card Number:		
Expiration Date:		
each month. I understand that	my bill will be cl t until revoked by	c. to charge my bill to my credit card harged automatically each month to my credit card. This y me in writing. HILCO United Services, Inc. reserves the my participation therein.
bill due date in order for the d	raft to be effectiv	CO United Services a minimum of 15 days prior to the next we for the current bill. If it is received less than raft will not be effective until the next month's bill
SIGNATURE:		Date:

Mail to: HILCO United Services, Inc. Attention: Consumer Drafts P.O. Box 26 Itasca, TX 76055