



Service-Disabled Veteran-Owned Small Business (SDVOSB)

Electronic Test and Measurement Equipment Specialists

Sales | Rentals | Leases | ISO/IEC 17025:2017 ANSI Z540-1 and Z540.3 Accredited Lab | MIL STD 45662 Compliant | ISO-9000 and 9001 Compliant

## LETTER OF AUTHORIZATION

I \_\_\_\_\_ authorize **NSCA & Tra-Cal Lab** to charge my credit card for equipment I wish to purchase, rent, lease, calibrate, and/or repair.

I also give my authorization to charge for any other services that NSCA, LLC and/or TRA-CAL, LLC that I may use.

Company Name: \_\_\_\_\_

Shipping Address \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

Shipping (select one):  Prepay and Add or  Use your account. Acct# \_\_\_\_\_

Carrier:  FedEx  UPS  Other \_\_\_\_\_

What delivery service do you want (i.e., 3-day, overnight, insurance): \_\_\_\_\_

What Equipment: \_\_\_\_\_

Bank of Credit Card, Name, and Phone Number: \_\_\_\_\_

Card Type:  MasterCard  VISA  AMEX  Discover  Other \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date (mm/yy): \_\_\_\_\_

Security Code: \_\_\_\_\_

Cardholder Name (As shown on card): \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that I am an authorized officer and/or signer of the above account and that the charge will not be disputed; so long as the transaction corresponds to the terms indicated in this form.

\*Shipping will be added to the final amount charged to the credit card unless we are using the client's shipping account. Additional credit card processing fees may apply.

RETURN FAX: (301) 527-9203

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