



The Trusted Professionals in Energy-Efficient Lighting™

www.MillerLightingProducts.com

Legal Business Name _____

Business Address: _____ City: _____ State: _____ Zip Code: _____

Business Phone: _____ Business Fax _____

Federal Tax ID: _____ State Tax #: _____

Type of Business: _____ How long in business at this address: _____

PURCHASING CONTACT: _____ EMAIL: _____

CREDIT CARD AUTHORIZATION:

Agreement:

I _____, authorize Miller OEM Supplies Inc. to charge my
Credit card for purchase order # _____.

(Company Name)

VISA/MASTERCARD/ AMERICAN EXPRESS

CREDIT CARD# ____/____/____/____

EXPIRATION DATE: _____

BILLING ADDRESS: _____

CARDHOLDER SIGNATURE: _____