






CREDIT CARD AUTHORIZATION

• IML, Inc.

• Credit Card Authorization

IML, Inc. is hereby authorized to assess the following credit card as described below:

Amount Authorized by Cardholder: \$ _____ in Payment	
of: _____ (Enter invoice number, if any.)	
Credit Card:	<input type="checkbox"/>  VISA <input type="checkbox"/>  MC <input type="checkbox"/>  AMEX
Card #: _____	Expiration: _____ Card
Security Code #: _____	(required for VISA charges)
Cardholder:	_____
Billing Address:	_____
Phone:	_____
Signature:	_____
Date:	_____

Please submit by mail or fax to:

Instrument Mechanic Lab, Inc.
 Oliver Hein
 1275 Shiloh Road, Suite 2780
 Kennesaw, GA 30144
 USA

Fax: 678-819-3661

The  Resistograph
 There is **No** Substitute!

IML, Inc.

1275 Shiloh Road, Ste. 2780, Kennesaw, GA 30144, USA • Toll Free: 800-815-2389 • Local: 678-819-2030 • Fax: 678-819-3661
 Email: imlusa@gmail.com • Website: www.imlusa.com