



**Rossee Oil
Rainey Oil
Farmer's Fuel
Newsome Oil**

Credit Card / Debit Card Authorization Form

Date: _____ Company Name: _____ (the "Company")

I, _____ (name), _____ (title) of the Company am the authorized cardholder for the below-listed credit card and hereby authorize Rossee Oil Co., Inc. to debit such card on purchases of services, etc. from Rossee Oil Co., Inc. when I am not present.

Please indicate below if this authorization is for a one-time use or if Rossee Oil Co., Inc. should keep the authorization on file for future purchases:

One Time Use Keep on File for Future Purchases

By signing this form, I agree not to initiate any chargeback proceedings with the credit card company for charges by Rossee Oil Co., Inc. on the credit card below, and understand that any such charge backs will constitute a breach of contract. I agree to waive any chargeback rights I may have, and will contact Rossee Oil Co., Inc. to resolve any dispute regarding charges by Rossee Oil Co., Inc. on the card.

Credit Card Info: (circle one)

Mastercard Visa Discover American Express

Card# _____ - _____ - _____ - _____

Printed Name as it Appears on Card: _____

Expiration Date: ____ / ____ Security Code: _____

Exact Billing Address as it Appears on Credit Card Statement (where the statements are mailed to):

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____

Cardholder signature: _____

Witness Signature: _____

Witness Name (print): _____

MUST HAVE A COPY OF THE CARD HOLDER'S ID submitted with this form.

Fax this form along with ID to 706-485-1109 or Mail to Rossee Oil Co., Inc., P. O. Box 3010, Eatonton, Ga., 31024, Attn: Robin Rainey