

CREDIT CARD AUTHORIZATION FORM

U.S. Infotel Corporation

TO BE COMPLETED IF REQUESTING CREDIT CARD TERMS

COMPANY:

(COMPANY must agree to company on sales order i.e. Company purchasing from U.S. Infotel)

CARDHOLDER NAME AND ADDRESS (As it appears on credit card)

TYPE OF CARD (Please circle one): MASTERCARD **VISA** AMEX

CARD NUMBER: _____

BANK: _____

EXPIRY DATE (MONTH/YEAR): _____

PLEASE FAX CLEAR AND LEGIBLE COPIES OF THE FRONT AND BACK OF THE CREDIT CARD BEING USED (MANDATORY REQUIREMENT).

I hereby knowingly and irrevocably authorize U.S. Infotel Corporation also doing business as Cynergy Software to charge purchases made by COMPANY from U.S. INFOTEL CORP. to the above credit card.

The credit card account information provided herein shall be used only for the intended purpose as authorized. Cardholder shall indemnify and hold U.S. Infotel Corporation harmless from all loss, damages, expense or liability in connection with such authorized use of the above said credit card.

All information disclosed herein is true and correct, without exception. In the event the information disclosed in the Credit Card Authorization Form is in any way incorrect, false or fraudulent, the cardholder shall be liable for all costs, expenses and attorney fees incurred in protecting U.S. Infotel Corp.' rights and interests.

I hereby authorize and consent to the collection, use and release of any credit, personal or other information about me at any time, from, to or with any credit bureau, reporting agency, my employer or any other person. I understand that all such information shall be collected and used by U.S. Infotel for assessing my credit-worthiness in connection with this authorization and application for credit.

SIGNATURE: _____ **DATE:** _____
(AS IT APPEARS ON THE CARD)

RETURN TO ACCOUNTING DEPARTMENT FAX#: (866) 340 5601
Corporate Office: (405) 516 2420 5770 NW Expressway, Suite 206, Oklahoma City, OK 73132
Email: sales@usinfotel.com