



MIKE'S WORLDWIDE, INC.
DISTRIBUTOR | WHOLESALER
www.GoMWI.com

C.O.D.

Company Check Authorization

Company/Purchasing Party Name: _____

I acknowledge and affirm I am an authorized signature for abovenamed Company/Purchasing Party transactions.

I authorize _____ to accept the following terms for MWI (Mike's Worldwide,
(Company Name/Purchasing Party)

Inc) for Company Check Invoices submitted for payment: _____

I understand and acknowledge I will personally guarantee any orders refused or refuted by UPS for lack of funds, false payment or due payment and any handling/freight costs associated with any orders refused or refuted.

Name (print)

Title

Street Address

City, State, Zip

Signature

Date

Driver's License #

Expiration

A copy of the Signature Party's current, valid ID or Driver's License must be included.