



Corporate Office: 285 Rutherford St, Goleta, CA 93117 Phone (805) 967-6484  
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## Credit Card Authorization Form

CARD HOLDER INFORMATION		
Company Name:	Name on Card:	
Card Holders Billing Address:		
City:	State:	Zip:
Telephone:	Email Address:	

PAYMENT AUTHORIZATION	
Card Type: Visa _____ MasterCard _____ American Express _____ Discover _____	
Card Number: _____	Exp Date: _____
Card Identification Number: _____ <small>(Visa, MasterCard, Discover: 3 digits on back &amp; American express 4 digits on front)</small>	
Charge End Date: _____ / _____ / _____	
<b>*IMPORTANT NEED COPY OF DRIVERS LICENSE*</b>	

I authorize the charge from Western Welding and understand that my signature on this form will serve as authorized signature on the credit card slip.

Card Holder Signature: \_\_\_\_\_ Date: \_\_\_\_\_