Please Note: If this is your first credit card transaction with Weld Wire Co., Inc. please include copies of card front & back, so we may verify possession. Be sure to return to the accounting fax number below only. Thank you for helping us to keep all information safe.

Credit Card Authorization Form (Please print clearly and fax back to 610-265-1012)

Company Name:	
Customer Name:	
	Invoice total to be charged:
Company Address:	
In lieu of my credit card imprint, I,	
	(Print name of cardholder exactly as shown on credit card)
hereby authorize Weld Wire Co, Inc to ch	sarge my order to the following credit card:
SWEET DESIGN AND AS AS AS AS AS ASSESSMENT	MASTER CARD
Cardholder's Name:	
Credit Card Account Number:	
	Security Code: (last 3 digits on the back of your card in the signature field)
Credit Card Holder Billing Address: (If di	fferent from above)
stated in this document, accept and agree to all	I acknowledge acceptance and understanding of all policies as cancellation and/or re-stock penalties and agree to all charges. I
BE SUBMITTED IN WRITING ALONG WIT RECEIPT OF ORDER FOR A CREDIT TO B for return with a restocking fee or credit to acc	I in the event of a dispute, REQUESTS FOR A REFUND MUST THE ALL ORDER DOCUMENTATION WITHIN 10 DAYS OF BE CONSIDERED. All items may, at our discretion, be accepted count. All agreements are made contingent upon strikes, fires, acts are sold with the understanding that under no circumstances and in their use.
Signature:	Today's Date:
For Internal Use Only Authorization Code:	