



PENNSYLVANIA WELDING SUPPLY COMPANY
 242 E. HUNTING PARK AVE
 PHILADELPHIA, PA 19124 PH: 215.329.7600

CREDIT CARD AUTHORIZATION

FROM: _____

CUSTOMER #: _____

I authorize **Pennsylvania Welding Supply Co.** to charge my credit card for the amount below.

CARD TYPE: _____ VISA _____ MC _____ AMEX _____ DISC

CARD NUMBER: _____

EXP DATE: _____ CVV/CVC: _____

NAME ON CARD: _____

BILLING ADDRESS: (FROM CREDIT CARD STATEMENT)

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE #: _____ FAX#: _____

EMAIL ADDRESS: _____

TRANSACTION AMOUNT: _____

APPLY TO:

INVOICES OR ORDER NUMBERS _____

AUTHORIZED SIGNATURE _____ DATE _____

PLEASE RETURN THIS FORM VIA EMAIL OR FAX
acctsrec@pawelding.com Office Fax: 856-778-8533

