



## Credit Card Authorization Release Form

### Credit Card Information (Circle One)



Visa



MasterCard



American Express

Credit Card Account# \_\_\_\_\_ Exp date: \_\_\_\_\_

In Hand Security Code VISA /MC (This is the 3 digit number on the back of your MC/VISA card) \_\_\_\_\_

In Hand Security Code American Express (This is the 4 digit number on the front of your card) \_\_\_\_\_

### **Billing Information** \* **(Company or card holders name) as on card**

Name \*\* \_\_\_\_\_ DBA \_\_\_\_\_  
(if applicable)

Cardholders Billing Address: \_\_\_\_\_  
(where the bill is mailed to)

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

I \_\_\_\_\_ (name of card owner or officer) authorize WORLD PAC, INC.  
to charge the above credit card for:

**(choose one)** ALL ORDERS **OR** THIS ORDER ONLY \_\_\_\_\_ \$ \_\_\_\_\_  
quote / invoice # **OR** order date total charge (if known)

and, I absolutely guarantee payment for any purchases made with the credit card account number identified below, including renewed cards.

Signature of the owner/officer \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

### **Shipping Information\*** ☐ Check here if the shipping address is the same as the billing address.

\* Complete this section **ONLY if the shipping address is DIFFERENT from the billing address.**

Recipients Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Shipping Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

I Authorize WORLD PAC, Inc. to ship the merchandise purchased with the above credit card account number to the above credit card billing address and company billing address as well as any addresses in this form under the heading of "Shipping Address". And I am fully aware that my credit card is being charged for any such purchases.

Cardholders Signature \_\_\_\_\_ Date \_\_\_\_\_