



Credit Card Authorization – One Time Charge

Company Name: _____

Name on Card: _____

Billing Address: _____

Purchase Order/ Reference Number (If Any): _____

Type of Credit Card (Circle): Visa Mastercard Discover Amex

Credit Card Account Number: _____

CC Expiration Date: _____

Security Code: _____

Amount Authorized: _____

Authorized by: _____

Title: _____

Date: _____

Signature: _____

**Please Note – a 3 % administrative charge is added to ALL credit card charges
AMX a 4% administrative charge is added.**

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