



CREDIT CARD AUTHORIZATION REQUEST

*REQUIRED FOR PROCESSING

Fax to: (805) 528-4300

*Date: _____ *Invoice Amount: \$ _____ +3% = Total Payment: \$ _____

Our preferred method of payment is via ACH or Check-by-fax. For your convenience, we do accept Credit Cards for an additional 3% fee with each charge.

*Card Type: VISA M/C AMEX

*Card #: _____

*EXP DATE: _____ *CV2 _____

*Name as it appears on the card: _____

*Company Name: _____

*Address where card is billed: _____

*City/State: _____ *Zip Code: _____ *Phone #: _____

*CARDHOLDER SIGNATURE: _____

Apply the credit card amount shown above to the following Freight Bill / Invoice numbers:

Table with 2 columns: Freight Bill / Invoice #, Amount. Contains 3 rows of blank lines for data entry.

We make paying your charges hassle free! Simply fill out the form below and the credit card of your choice (Visa/Amex/MC) will be on file so it's always ready when you are. Each shipment will be recorded as a debit on your credit card at the time we manifest your shipment. A detailed invoice with the debited amount and breakdown of the charges will follow via mail or email.

(Please enter email address _____)

Please complete this form and return via one of the following methods:

- Fax: (805) 528-4300
• Email: credit@awest.com
• Mail: 2121 10th Street; Suite C, Los Osos, CA 93402

I, _____, hereby authorize American West Worldwide Express to keep my credit card payment information on file, in a secure file, to be used for future shipments that are approved by me or authorized personnel within my organization. I authorize & request that the appropriate credit card processing center honor the debit entries initiated by American West. This authorization relates to all payments required on my account with American West. This authorization will remain in effect until all amounts owed American West are paid in full or until I cancel this authorization in writing. I understand that cancellation must take place after my account balance has been paid in full.

*****NOTE***** BY SIGNING BELOW, YOU ARE GIVING AMERICAN WEST WORLDWIDE EXPRESS PERMISSION TO KEEP YOUR CREDIT CARD ON FILE, TO BE USED FOR FUTURE SHIPMENTS. IF THIS IS NOT YOUR INTENTION, PLEASE CONTACT THE CORPORATE OFFICE AT (805) 926-2800

Cardholder Signature

American West 2121 10th Street; Suite C Los Osos, CA 93402 (805) 926-2800 Fax: (805) 528-4300