

CREDIT CARD AUTHORIZATION FORM

credit@worthingtonav.com

COMPANY NAME:			
CARD HOLDER'S NAME:			
BILLING ADDRESS OF CARD:			
TYPE OF CARD (circle one):	VISA	MASTERCARD	AMEX
ACCOUNT NUMBER:			
EXPIRATION DATE:	Verifica	ation code from back of cre	dit card:

I authorize Worthington Aviation to process this credit card for the following charges:

	Order Total	\$
	Freight Charge	\$ _
	3% Convenience Fee	\$
	Authorized Amount	\$
	Reference:]
PRINTED NAME:		_
SIGNATURE:	<i>f</i> (:)	_DATE:
(Cardholder or authorized o	micer)	

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