

**Willington Nameplate Inc.**  
**11 Middle River Drive**  
**Stafford Springs, CT 06076**  
**Toll Free Phone: (877) 967-4743**

**Credit Card Authorization Form**

**Instructions:**

1. Print a copy of this form.
2. Fill in all required information.
3. Fax confidentially to **(860) 684-1288**

**Willington Nameplate accepts American Express, Discover, MasterCard and Visa.**  
**Terms: Credit Card Charged Upon Shipment of Order.**

**Company Name on Credit Card**

**Name on Credit Card**

**Billing Address of Credit Card**

**Street:**

**City:**  **State:**  **Zip:**

**Type of Card**

**Card Number**

**Expiration Date (MM/YY)**

American Express

Discover

MasterCard

VISA

**Billing Amount: \$**  **USD Plus freight charges, if applicable**

**Invoices in which to apply payment:**

**Is a receipt required for this transaction? YES or NO**

**If there is a question concerning this transaction, who should be notified:**

**Name** \_\_\_\_\_ **Phone#** \_\_\_\_\_

**I hereby certify that I am the above named cardholder, and authorize Willington Nameplate to charge the above-referenced credit card in the amount indicated above (which may be adjusted if I verbally or otherwise so authorize) for goods delivered or services rendered.**

**Authorized Signature** \_\_\_\_\_ **Date** \_\_\_\_\_