|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date: | \_\_\_\_ / \_\_\_\_ / \_\_\_\_ | | Invoice Ref. # | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Card Holder Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Credit Card | Visa | Master Card | | AMEX | | Discover |
| Card # | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Expiration Date: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | CVV Code: | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Billing Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| City: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| State: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Zip Code: | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Phone: | ( \_\_\_\_\_\_ ) \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Authorize: | I authorize “Your Brokerage” to charge my credit card in the amount of:  $ \_\_\_\_\_\_\_\_\_\_\_\_ USD (U.S. Dollars) | | | | | |
| Printed Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |

I authorize “Company Name” to charge my credit card for the outstanding/current balances owed on freight bills. All payments are subject to a 4% card processing fee. I further understand that this authorization allows “Company Name” to also charge my credit card for any unpaid freight invoices pertaining to my account for a twelve month period starting from today’s date.