|  |  |  |  |
| --- | --- | --- | --- |
| 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.