



## Credit Card Authorization Form

### CARDHOLDER INFORMATION

Name: \_\_\_\_\_

Billing Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_

Direct Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

I hereby affirm that I am the owner of the below referenced credit card and that **my name** is listed on the front of the credit card.

I hereby authorize Lug It Logistics LLC of the New York NY to charge my credit card (listed below) in the amount of \$ \_\_\_\_\_ or \_\_\_\_\_ % of my invoices for dispatch.

\_\_\_\_\_  
Account Holder Signature

### CREDIT CARD INFORMATION

Credit Card Type:  MasterCard  Visa  American Express  Discover Card

Number: \_\_\_\_\_

Expiration Month: \_\_\_\_\_ Expiration Year: \_\_\_\_\_ Security Code: \_\_\_\_\_

Cardholder Signature X \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Security Code: \_\_\_\_\_