

CREDIT CARD AUTHORIZATION FORM

ADVANCE FL LIMOUSINE, INC
SOUTH FLORIDA LIMOUSINE GROUP

PH: 305-735- 3242/954-237-7486

FAX: 954-642-8616

Web:www.southfllimo.com Email: limo@southfllimo.com

Name [as appears on credit card] _____

Billing address _____

Billing city _____ State _____ Zip code _____

Phone _____ Fax _____

Web Site Address: _____

Email Address: _____

Credit card information

Type of card: Visa Master card

Credit card number _____

Expiration Date: _____

Security code [CUV]: _____

I _____ authorize advance fl limousine to Charge my credit card the full amount of the service, weekly charge by \$1.00 per Lead and 20% commission of all farm out jobs. One time \$50 activation fee will apply.

Card holder

Print name _____

Signature _____

Position in the company _____ Date _____