

Credit card authorization form for Boss Limousine

Member first name: _____

Last Name _____

Address where you receive your credit card bill.

Street: _____

Billing city: _____

State _____ Zip Code _____

Phone _____ Cell _____ Work _____

Circle One: Visa ----- MasterCard ----- Amex----- Discover

Credit Card # _____ Expiration Date: _____

\$ AUTHORIZATION AMOUNT

\$ _____

PLACE COPY OF CARD FRONT HERE!!	PLACE COPY OF CARD BACK HERE!!
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Place a copy of front and back of credit card in the space below

Fax Form to 281-996-7939

I, the undersigned, hereby authorize Boss Limousine.

to automatically deduct payment from the credit card listed above to cover all charges incurred in relation with my transportation service on behalf

of _____ (passenger's name).

Card member signature: _____ Date: _____