## CREDIT CARD PAYMENT AUTHORIZATION

## TO BE COMPLETED AND SIGNED BY CARDHOLDER You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled. Card Type: Master Card\_\_\_\_\_ Visa \_\_\_\_ American Express\_\_\_\_ Other\_\_\_\_ COMPANY NAME: COMPANY'S BILLING ADDRESS: COMPANY POSTAL CODE: \_\_\_\_\_ CREDIT CARD NUMBER: CARDHOLDER NAME (as shown on the card): EXPIRATION DATE (mm/yy): \_\_\_\_ / \_\_\_ CCV CODE: \_\_\_\_ PAYMENT RECEIPT SEND TO: \_\_\_\_\_ EMAIL: \_\_\_\_ I, \_\_\_\_\_\_, authorize Speedee Trucking Ltd. DBA Speedee Transport to charge my credit card above for agreed upon transportation service. I understand that my information will be saved to file for future transactions on my account. SIGNATURE OF CARDHOLDER: \_\_\_\_\_

DATE: