USA Bus Charter

Please Make Your Check Payable to; USA Bus Charter
Payment Mailing Address: 2647 Gateway Road, Suite 105-455 Carlsbad, California 92009 Tel. 800.979.4498 Fax. 888.467.4214

CREDIT CARD AUTHORIZATION FORM

Date	Account Executive		
Customer-Job Name			
Telephone No:	Fax No:		
E-Mail Address:			
Charter Date(s):			
City and State of Service:			
Credit Card Type:	[] American Express	[] MasterCard or VISA	[] Discover
Credit Card No:	Exp-Date		
Cardholder Name:			
Billing Address For Credit Card:			
City:	State:		Zip Code:
CVV2-MasterCard & VISA Only: 4 Digit American Express Security Code:			
[] When checked, please pro	ovide a copy of your State of Federal	issued I.D. This is for your protection	n and ours, Thank you.
Contract Amount \$:			
Amount Authorizing To Charge \$:	Includes:		
an error in your billing you agree to may apply if charges are disputed. multiple charges that will total the abwith your charter sales agent. You a into with us. All charges for service conditions by signing this credit card. In the event of overtime, additional commenced, you agree and authorithis specific charter and up to the all	e a minimum charge due or cancellat contact USA Bus Charter first, prior USA Bus Charter may provide your pove amount you agree to pay. A may gree that the service you receive from are billed pursuant to that Contract. If authorization form. Services requested, or additional feeting the provided by the contract. In the contract.	to disputing any charges with your or credit card information to our affilia to the card information to our affiliance. The card information to our affiliance are not the signing party of the card to charge this credit card for sure event the cardholder listed below	ct and Confirmation ("Contract"). If you feel there is credit card company. A reprocessing fee of \$50.00 ate to bill for services. In this event you may have a your credit card may apply. Please discuss this suant to the Contract you have signed and entered that contract, you are still bound to those terms and contract has been signed and/or your charter has ch service's, fees or otherwise in accordance with is not the person whose name that appears on the ew those terms and conditions before signing this
l have read, agr	ee and understand the terms and	conditions above and am duly au	thorized to make this charge.
Cardholder Signature	Printed Nam	ne	Date
OFFICE USI	E ONLY: ATR\$:	3P:	P\$