

# A SIGNATURE LIMOUSINE

Arrive in Style

Ph: 352-683-1215 Fax: 352-683-9486

## SIGNATURE ON FILE AUTHORIZATION

I hereby authorize my signature to be on file with A SIGNATURE LIMOUSINE, Inc. for the purpose of charging limousine services on my credit card. I authorize the respective credit card company designated below to accept this form in lieu of my signature appearing on the individual credit card receipt for limousine services rendered.

The pertinent information below is needed:

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card Type: VISA: \_\_\_\_\_ MC: \_\_\_\_\_

Please supply us with names of those who are authorized to order transportation service with this credit card:

\_\_\_\_\_  
\_\_\_\_\_

Receipt to be mailed to me at: \_\_\_\_\_

\_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

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Card Holder Signature \_\_\_\_\_ Card Holder Name (Print) \_\_\_\_\_

\_\_\_\_\_  
3 or 4 digits on back of card

In addition, you must photocopy the front and back of the cardholder's credit card and send it in.

Date: \_\_\_\_\_ A SIGNATURE LIMOUSINE Employee Name: \_\_\_\_\_