



CREDIT CARD AUTHORIZATION FORM

Sign and complete this form to authorize Global Logix Enterprises LLC to make a one-time debit to your credit or debit card listed below. The merchant fee will depend on the type of card. By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is a permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below:

I _____ authorize Global Logix Enterprises LLC
(Full Cardholder Name)

to charge my credit card account indicated below for _____ on or after _____

Invoice # _____

Billing Address _____

City, State, Zip _____

Email _____ Phone # _____

Account Type: ___ Visa ___ MasterCard ___ Discover ___ AMEX

Cardholder Name: _____

Account Number _____

Expiration Date _____ CVV2 (3 digit number on back of the Credit Card) _____

Authorized Signature _____ Date _____

I authorize Global Logix Enterprises LLC to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the invoices listed above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form. Your completion of this authorization form helps us to protect you, our valued customer, from credit card fraud. Global Logix Enterprises LLC will keep all information entered in this form strictly confidential. The services performed or to be performed that are cancelled with this credit/debit card payment are subject to the terms and conditions of the Bill of Lading and Airway Bill issued by Global Logix Enterprises LLC and their associates carriers.