



Credit Card Transaction Authorization Form

(Please Print)

| | | | | |
|--|----------|-------------------|-------------------------------------|----------|
| (Account Name) | | | | |
| Amount \$ <input style="width: 150px;" type="text"/> | | | | |
| I _____ authorize the below marked credit card to be charged for the amount listed above. | | | | |
| <input style="width: 200px;" type="text"/> (Ref. No. /P.O. No.) | | | | |
| Credit Card Type | AMEX () | Discover () | Master Card () | Visa () |
| (Cardholder Name) | | | | |
| (Billing Address Where Statement is Sent) | | | (Phone Number Associated With Card) | |
| (Credit Card Number) | | (Expiration Date) | (Security CVV2 Code) | |
| <p>This is authorization form is to acknowledge the charges made to my credit card(s) "Listed Above". I do acknowledge that the transaction(s) made were credited to my credit card by D3 Aviation, Inc.</p> <ul style="list-style-type: none"> ➤ This Credit card authorization form is required by D3 Aviation for the purpose of this transaction by credit card. The purpose of the form is to protect you, the card holder from fraudulent use of your card. ➤ This is our "single use" authorization meaning that it will only be used for the purposes of this transaction you stipulate and only up to a maximum you authorize. ➤ All information is confidential between you, your credit card issuer, and D3 Aviation, Inc. <p>If you should have any further questions regarding this policy, please contact out accounting department. We would be happy to answer question you may have.</p> | | | | |

Card Holder's Name

Print Name: _____ Date: _____

Signature: _____

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