

# East Coast Drayage

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## PAYMENT/CREDIT CARD AUTHORIZATION

EVENT: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ BOOTH # \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

*EACH FORM MUST BE ACCOMPANIED WITH A PAYMENT/CREDIT CARD AUTHORIZATION FORM.*

TOTAL BALANCE DUE \$ \_\_\_\_\_ DUE PRIOR TO SET-UP

DEPOSIT \$ \_\_\_\_\_ DATE: \_\_\_\_\_

### METHOD OF PAYMENT (PLEASE CHECK ONE THAT APPLIES)

CHECK \_\_\_\_\_ US MONEY ORDER \_\_\_\_\_ CASHIER CHECK \_\_\_\_\_ BANK TRANSFER \_\_\_\_\_

VISA \_\_\_\_\_ MASTER CARD \_\_\_\_\_ AMERICAN EXPRESS \_\_\_\_\_ CASH \_\_\_\_\_

CARD HOLDER NAME: \_\_\_\_\_

CARDHOLDER ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CREDIT CARD #: \_\_\_\_\_ EXP: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_