

## **Credit Card Authorization Form**

For protection and security reasons please read this before continuing: This form must be completed in full, signed, and faxed to our secure fax at (917) 979-4577 or send it to us via email to **info@meemlimo.com**. We will provide you with a copy of the invoice upon request.

\*\*\*If the bank card is a **Corporate Card**, please provide us with a copy of the credit card front and back; include a note on your company letterhead authorizing use of the card, and signed by the same person signing this form.

\*\*\*If the bank card is a **Personal Card**, please provide us with a copy of your credit card front and back; provide us

authorized user driver's license or passport page showing signature and picture.

NOTE: Be sure to provide us with legible copies.

You request that we use the credit card(s) to:

- Render payment for requested overtime charges.
- To pay for a canceled reservation(s).

## All Information Will Remain Confidential

Cardholder Name:				
Cardholder's Billing Address (Req	uired):			
City:	State:	Zip Cc	de:	
Credit Card Type: Visa VISA				
Credit card Number:		Expiration Date:—		
Card CVV Security Code: [ 3 or 4 digits, located on the back of most cards]				
Confirmation number: ————	Ar	mount to Charge \$	USD	
lo	authorize to charge the	e agreed amount listed abor	le to my credit card provided herein. I agree	

that I will pay for this service in accordance with the issuing bank cardholder agreement.

Please Choose: 🗆 Single Use Agreement 🛛 🗖 Blanket Agreement

By using Blanket Agreement, I agree and authorize that the credit card I have provided will be used to charge the present invoice and future transactions.

**Cardholder**: I certify that the above statements and information made in the agreement are true and correct to the best of my knowledge.

By signing this agreement, I authorize "MeemLimo" to charge the credit card provided to the agreed quotation or invoice amount. I have read and agree with Meemlimo **terms and conditions**. I understand that I will be held fully responsible for the above charges.

Signature:	Name:	Date:
We require a real signature	Coop and operil this form to info Oper	engline com or for at (0

We require a real signature. Scan and email this form to info@meemlimo.com or fax at (917) 979-4577

