CRUISAIR WESTCOAST LLC

SIGNATURE __

Cruisair Westcoast LLC

3301 34th Avenue North St. Petersburg, FL 33713 727-526-7875 shop@cruisairsuncoast.com www.cruisairsuncoast.com

One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize Cruisair Westcoast LLC to make a one-time debit to your credit card listed below.

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only and does not provide authorization for any additional unrelated debits or credits to your account.

I(Full name)	authorize Cruis	sair Westcoast LLC to ch	arge my credit card
account indicated below for			This payment is for
(Description of goods/serv	rices)		
Billing Address		Phone#	
City, State, Zip		Email	
Account Type: 🗌 Visa	MasterCard	☐ AMEX ☐ D	scover
Cardholder Name			
Card Number			
Expiration Date			

I authorize the above-named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described 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.

DATE