Payment Authorization Form

Authorization Reference Number:

Authorization Date:

Authorizing Party Name:

Contact Information:
Email:

Phone:

Payee/Travel Agency Name:
Myra Barcas, Toastie Potato Travel Adventure

Payee Contact Information:
Email:
myra@toastiepotato.com

Phone:
3528427113

1. Payment Details

Detail	Information	Notes
Payment Amount		Amount to be paid
Currency	USD	United States Dollars
Payment Method	Credit Card Only (Call Agent)	Preferred payment method
Payment Processing Date		Date payment should be processed

2. Account and Reference Information

Booking Number or Reference:

Description of Goods or Services:

3. Authorization Confirmation

I hereby authorize the above payment in accordance with company policy and applicable agreements. I confirm that the payment details are accurate and that the goods or services have been received or will be received as described.

Authorizing Party Signature
Signature: _____
Printed Name:

Title:

Date:

Internal Approval/Witness
Signature: _____
Printed Name:
Myra C. Barcas

Title:
Travel Advisor /Owner

Date:

Company Name: Toastie Potato Travel Adventure

Company Address: 14260 W Newberry Rd, Newberry, FL 32669

Authorization Validity Notice: This payment authorization is valid only when signed by an authorized representative of the company. Unauthorized payments will not be honored. This authorization must be retained for audit and compliance purposes for a minimum of seven years. Any modifications to payment details require a new authorization form.