



# TRAILWAYS

## Transportation Group

### Authorization for Credit Card Use

Company Name:		
Name on Card:		
Billing Address:		
Billing Address Line 2:		
Trailways Load #:		
Payment Card:	Visa	Mastercard
Card Number:		
Expiration Date:		
Identification #:		
Amount to Charge:	\$	CAD USD

I authorize **Trailways Transportation Group Inc** to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.

Name:	
Date:	
Card Holder Signature:	