



Credit Card Authorization Form

I, _____, hereby authorize MH Limousine to charge my account not to exceed: \$ _____

() Visa () MasterCard () American Express () Discover () Diners Club

Credit Card Number: _____

Expiration Date: _____ / _____ CVV # _____

Credit Card Billing Address:

Street _____

City _____ State: _____

Zip Code: _____ - _____ Country (if not in the U.S) _____

Telephone: () _____ - _____ [home] () _____ - _____ [cell]

Name on Card: _____

Sign here: _____

Date: _____

Special Instructions: Please enclose a copy of the Credit Card front and back, along with a copy of your driver's license. All must be visible and legible for us to view clearly. Your completion of the "Authorization Form" helps us protect you, our valued customers, from credit card fraud. MH Limousine Service will keep all information obtained on this from strictly confidential. Please note that there will be a fee of \$200 for cleaning the vehicle due to any spillage or damages. If the damage proceeds above \$200 we will send a receipt with the amount due.

SEDANS, SUVS, LIMOUSINE, VANS, BUSES

P.O. BOX 6151, SPRINGFIELD, VA 22150

www.mhlimousine.com

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