

A Candie's Limousine

Arrive in Style

Ph: 352-332-3834 Fax: 352-332-4334

SIGNATURE ON FILE AUTHORIZATION

I hereby authorize my signature to be on file with A Candies Production, Inc. for the purpose of charging limousine services on my credit card. I authorize the respective credit card company designated below to accept this form in lieu of my signature appearing on the individual credit card receipt for limousine services rendered.

The pertinent information below is needed:

Credit Card #: _____ Expiration Date: _____

Card Type: AMEX: _____ VISA: _____ MC: _____ DINERS: _____ DISC: _____

Please supply us with names of those who are authorized to order transportation service with this credit card:

Receipt to be mailed to me at: _____

Contact Phone Number: _____ Fax: _____

Card Holder Signature

Card Holder Name (Print)

3 or 4 digits on back of card

In addition, you must photocopy the front and back of the cardholder's credit card and send it in.

Date: _____ Candies Employee Name: _____