

PRIORITY IMPORT-EXPORT SERVICES

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Customs Brokerage Surety Bonds Marine Insurance Traffic Management

CREDIT CARD AUTHORIZATION

(every line must be completed)

Lauthoring
I authorize you to bill my credit card account the amount of:
□ Visa □ MasterCard
Invoice number:
Customs Entry Number:
Shipment references:
Card Number:
Security code*
Expiration Date:
Cardholder name:
Billing Address for Credit Card:
Cardholder's signature Date
Please complete and fax or email to us for processing.
Thank you!
* 3 numbers on back of Visa and MasterCard, 4 numbers on front of Amex and Discover
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Member