

March 4, 2013

Credit Card Authorization Form

I hereby authorize D&D Travel and/or respective service providers and suppliers to charge my credit card as indicated using the information below.

Amount to be charged: _____ Booking/Invoice Number: _____

Card Type: American Express Visa Mastercard Discover

Card Account Number: _____ Expiration Date: _____ CID: _____
CID is 3 digits on the back of the card for VI, MC & DS, 4 digits on front of card for AX

Cardholder Printed Name: _____

Cardholder Signature: _____ Date Signed: _____

Email Address: _____

Phone Number: _____

Billing Street Address: _____

Billing City/State/Zip Code: _____

Destination/Purpose/Supplier: _____

Traveler name(s) as appears on travel documents (passport, driver's license, military id) Date of Birth

If there are any questions or concerns, please do not hesitate to contact us.

Thank you
Donna Smith
CEO