

CREDIT CARD PAYMENT AUTHORIZATION

I hereby authorize **ENERGY TRANSPORT LOGISTICS** to bill associated charges plus a 5% convenience fee to my credit card.

TAG # _____ Amount \$ _____

Company Name: _____

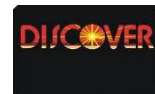
Cardholder's Name: _____
As it appears on the front of the credit card

Billing Address: _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Card Type



Card Number: _____

Expiration date ____/____/____ CVV _____ (3 digit security code on the back of card)

Card Holder/authorized signature _____

Date ____ / ____ / ____

Retain my credit card information in file for future use YES NO

THANK YOU FOR YOUR BUSINESS!!



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