



Credit Card Authorization Form

Oahu Express Invoice Number: \_\_\_\_\_

This signed credit card authorization form will serve as acknowledgment and confirmation that the following cardholder authorizes Oahu Express, LTD to debit the following card for the following total amount: \$ \_\_\_\_\_

Please indicate the type of card being used:

Master Card

Visa

Name as it appears on the card: \_\_\_\_\_

3 digit security code on the reverse of the card: \_\_\_ \_\_\_ \_\_\_

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_ / \_\_\_\_

Cardholder acknowledges receipt of goods or services (or planned receipt of goods and services) in the amount of the total shown above, and agrees to pay amount according to the card issuer agreement.

Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Contact Information: Please provide complete name, credit card billing address, telephone number, and driver's license identification number:

Name (Print): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Credit Card Billing Address (with zip code): \_\_\_\_\_

Driver's License ID number: \_\_\_\_\_

**Return via Fax to (808) -682-8811 (Attention: Accounts Receivable)**

Security Statement: All information provided is considered confidential, properly secured, or immediately destroyed upon completion of the transaction by Oahu Express personnel.