



CREDIT CARD AUTHORIZATION FORM

Circle Type: VISA MASTER CARD AMERICAN EXPRESS DISCOVER

Customer Name: _____

Card Number/ Exp. _____ Enter into Total FBO under Customer Account Information

Card Billing Address: _____

Street Address

City

State

Zip

Phone: () _____

I understand that I am responsible for paying for all products and/or services when they are received. If any balance remains due on my account at the end of each day, I authorize LE Aviation to charge my credit card as indicated above for the full amount of any remaining balance. This authorization will remain valid as long as I continue to use LE Aviation Products and/or services.

Customer Name

Customer Signature

Date

***A CREDIT CARD MUST BE ON FILE FOR THE RENTAL OF LE AVIATION HEADSETS, AND FOR THE OVERNIGHT RENTAL OF LE AVIATION AIRCRAFT**