LE AVIATION

Customer 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 _____

_____

_____
City State Zip

Phone: ( )_____

I understand that I am responsible for paying for all products and/or services when received. If any balance remains due on my account at the end of the 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 Signature _____ **Date** _____