LOANSTAR

TRAILER LEASING AND RENTAL

# CREDIT CARD AUTHORIZATION FORM – FAX 801.433.5430

**CREDIT CARD: Visa Master Card American Express Discover**
*(CIRCLE ONE)*

**CREDIT CARD NUMBER: _____EXP ____ / ____MMYY**

**SECURITY CODE (CVV2): _____**

**NAME AS IT APPEARS ON CARD: _____**

**BILLING ADDRESS Street: _____**

**City _____ State _____ Zip _____**

**CONTACT PHONE #: _____**

I authorize Loanstar Leasing to charge provided credit card for the following invoices amount as specified below:

| INVOICE | DATE | AMOUNT |
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| | | |
| TOTAL | | |

**AUTHORIZED CARDHOLDER SIGNATURE: _____**

**DATE: _____**