

A2Z SERVICE LLC

6512 N. Canton Center Rd.

CANTON MI 48187 - USA

Toll Free 1800- 876-1614

Direct:270-312-7243 Fax: 734-436-0120

Email: iq@a2zservicesllc.com

www.a2zservicesllc.com

One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize A2Z Services LLC to make a one time debit to your credit card listed below. By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below:

I _____ authorize A2Z Service LLC or its parent Company (Airline) to
(Full name)

charge my credit card account indicated below for _____ on or after _____.

This payment is for

(Amount)

(Date)

(Description of Travel, Tour services)

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

Account Type: Visa MasterCard AMEX Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____

SIGNATURE _____

DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the Ticket or Tour services described above, for the amount indicated above only, and are valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.