



VIA FACSIMILE: _____ CUSTOMER NAME: _____
NAME ON CARD: _____ AWB/INVOICE #: _____

FACSIMILE CREDIT CARD AUTHORIZATION FORM

UPON MY SIGNATURE BELOW, I AUTHORIZE FREIGHT SYSTEMS INTERNATIONAL, INC.
TO CHARGE MY CREDIT CARD FOR THE SERVICES PROVIDED TO ME OR MY BUSINESS

AMOUNT IN U.S. \$: _____ TODAY'S DATE: _____

CREDIT CARD (PLEASE CIRCLE 1) VISA MASTER CARD
 DISCOVER AMERICAN EXPRESS

ACCOUNT #: _____

EXPIRATION DATE: _____ SECURITY CODE: _____

SIGNATURE: _____

PRINT NAME: _____

BILLING ADDRESS _____

TELEPHONE #: _____

Please fax completed form to FREIGHT SYSTEMS INTERNATIONAL at (305)477-1674. You MUST include a copy of the credit card to be used and some form of photo identification.

FSI CARGO - 10025 NW 116 Way, Suite 17 Medley Fl, 33178 United States
P:305 477 4752 F:305 477 1674