

# JMG Inc (C4aB)

## Credit Card Authorization

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Circle One:      Visa              M/C              Discover

Account Number: \_\_\_\_\_

Expiration date: \_\_\_\_\_                      Sec. Code: \_\_\_\_\_

Cardholder's name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City \_\_\_\_\_              State \_\_\_\_\_              Zip code \_\_\_\_\_

Cabin Choice \_\_\_\_\_              Cost \$ \_\_\_\_\_

I hereby authorize JMG Inc (C4aB) to purchase the following on my credit card through the travel agency Dream Travels.

\_\_\_\_\_ Travel Insurance (\$49)

\_\_\_\_\_ Cabin Choice in Full.

Cardholder's signature \_\_\_\_\_