

CREDIT CARD Rate Monitor AUTHORIZATION FORM

For Rate-Highway, Inc. to properly process your monthly invoice by credit card we must have a legible copy of the credit card you will be charging along with your legible signature. By completing the following steps you will ensure a successful and timely billing, avoiding any interruption of services.

Instructions

- 1. Complete the form by printing legibly with a dark pen, all billing and shipping information in the blanks below.
- 2. Sign with the credit card holder's signature on the line indicated.

Type of Card: VISA/MASTERCARD/AMEX (please circle one)

- 3. Include a photocopy of the front and back of the signed credit card.
- 4. Fax all this form, along with the photocopy of the signed credit card, back to us toll free to our secure fax machine at 1-888-551-0029 to complete your order. Thank you!

Credit Card Holder's Name as it appears_____ Credit Card Number _____ Expiration Date _____ CVC Code (last three digits of the number on the back of the card, top right four on the front for Amex) **Credit Card Billing Address** Street: _____ City: State: Zip Code: Telephone:_____ As the credit card holder, I hereby authorize Rate-Highway, Inc. to charge my Rate-Monitor services to the credit card listed above. Cardholder's Signature ______ Date _____

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. All information entered on this form will be kept strictly confidential by Rate-Highway, Inc.

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