



VANUATU MARITIME SERVICES, LTD

PHONE (212) 425 9600

FAX (212) 425 9652

Email@vanuatuships.com

CREDIT CARD AUTHORIZATION

CUSTOMER INFORMATION:

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Tel: _____ Fax: _____

Email address: _____

Customer Number: _____ Amount Authorized: _____

Invoice Number(s) {PLEASE LIST ALL}: _____

NAME ON CREDIT CARD: _____

(Please Print)

Type: (Circle One) AMEX VISA MASTERCHARGE OTHER _____

Credit Card Number _____

Expiration Date: _____ / _____ mm/yy SVC _____

Cardholder's
Signature _____ /Date _____

Print Name: _____

Other Signature: _____

*** Please sign and date this form and fax (do not email) it back to VMSL at 212 425 9652 with a clear and legible photocopy of the Front and Back of the Credit Card that you wish to use.

**** Please be advised that a separate invoice will be issued for credit card fees regarding this transaction and sent to the above email address.