



**PAYMENT AUTHORIZATION FORM**

Name G&W Employee: \_\_\_\_\_

Client Name: \_\_\_\_\_

Amount of Charge: \$ \_\_\_\_\_ USD (\*excluding 3% administration fee, see below\*)

Invoice # / Customer ID: \_\_\_\_\_ Sage ID: \_\_\_\_\_

Type of Card:  American Express  Visa  MasterCard  
**(PAN) PERSONAL ACCOUNT NUMBER, EXPIRATION DATE AND 3 DIGIT VERIFICATION CODE TO BE TAKEN BY PHONE ONLY.**

Name Printed on Card: \_\_\_\_\_

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

City, State & Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

Card Member acknowledges receipt of goods and/or services in the amount of the total shown heron and agrees to perform the obligations set forth by the Card member’s agreement with issuer. **\*An Administration Fee of 3% will be added for processing charges on American Express, Visa and MasterCard accounts\***

**PLEASE SELECT ONE OF THE BELOW PAYMENT OPTIONS**  
 I authorize Gander & White to charge the above credit card for this one-time transaction only.

*I confirm that Gander & White Shipping Inc. is authorized to charge my credit card as indicated above.*

Authorized Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- After completing and signing form, please return to your account holder.