

Airborne Elite, LLC

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Credit Card Authorization Form

I, _____ authorize Airborne Elite, LLC to charge
my credit card for the amount (numbers and words)

\$_____

Name on Credit Card: _____

Billing Address: _____

Type of Card: _____

Number: _____

Expiration Date: _____

Security Code: _____

Signature: _____

Print Name: _____

Today's Date: _____