



AUTHORIZATION FOR CREDIT CARD CHARGES

This form authorizes Superior Transport Group Inc to charge: (USD) \$ _____ (total amount)

For services rendered relating to invoice number(s): _____ (required information)

Account Name: _____ Account Number: _____

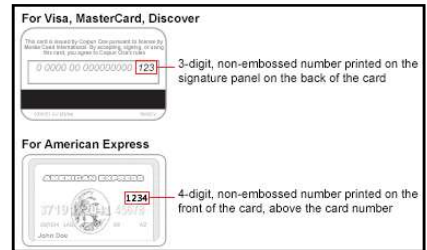
Agreement – Required Information

I accept the charges above and authorize charges to the following account

VISA MASTERCARD AMEX (CIRCLE ONE)

CARD #: _____

CARD SECURITY CODE: _____



Expiration Date: _____ Corporate Name: _____

Name on Credit Card: _____

Cardholder's Signature: _____

Statement Billing Address: _____

City: _____ State: _____ Zip: _____

Cardholder's Phone Number: _____