



CREDIT CARD AUTHORIZATION FORM

Date: _____

I hereby authorize Rohlig USA, LLC to debit my credit card for \$ _____

being payment for freight forwarding services – Invoice Nos.

| Invoice Number | Amount |
|----------------|--------|
| | |
| | |
| | |
| | |
| | |

Name of Cardholder: _____

Company Name: _____

Cardholder's Address: _____

Amex Visa MC Discover

Credit Card #: _____

Verification Code (Amex): _____

ID Code (Visa, MC, Discover): _____

Expiration Date: ____ / ____

Signature of Cardholder: _____

Please note:

A 3.5% handling fee will be applied to all transactions. For security purposes, this document will be destroyed after successful completion of the transaction.

Rohlig USA, LLC
Finance Department
1743 S. Linneman Road | Mount Prospect, IL 60056
Tel : 224-563-3300 eFax : 630-597-9408