Summit Aviation
A GREENWICH AEROGROUP COMPANY

Credit Card Authorization

TO: Summit Aviation, Inc. ATTN: Leonard Trogdon / Penny Jones
PHONE: 336.497.5536 FAX: 336-497-5596

FROM: Company (Customer's Name) _____
DATE: _____
# of PAGES: _____
Reference (PO #, Sales Order #, Etc.) _____

MESSAGE: Please complete, sign & fax to 336-497-5596 or return via return email

I authorize Summit Aviation, Inc. to use my credit card for payment of services stated below and am aware there will be a convenience fee added when credit card payment is processed at $3,000.00 or above.

Charge Amount: $ _____ **Aircraft:** _____ **Job#:** _____

Card Type: VISA ◯ Master Card ◯ Discover ◯ Amex ◯

Name on Card: _____

Contact name & Phone: _____

Company name: _____

Card Number: _____

Expiration Date: _____

Card Billing Address: _____

Billing City, State, Zip _____

CVV # _____ CID# _____

(back of all credit cards) (front of AMX card)

Signature: _____

Summit Aviation, Inc. will accept this credit card for the amount of the sale noted above, upon approval by the credit card company.

IF ANY QUESTIONS OR PROBLEMS, PLEASE CALL 336-497-5523 or 336-497-5524