

Aviation Partners Group Inc  
28260 Air Park Road Unit 114  
Punta Gorda, Florida 33982  
Phone 941-637-8585  
Fax 941-637-0388

**AMEX, MasterCard, Visa, Flexgt Authorization Form**

Please provide the following information for a credit card sale:

1. Credit Card Account Number \_\_\_\_\_
2. Card Expiration Date \_\_\_\_ / \_\_\_\_ CVC Code 3 or 4 Digit (Back of Card) \_\_\_\_\_
3. Cardholder Billing Name (Please Print) \_\_\_\_\_
4. Credit Card Billing Street Address \_\_\_\_\_
5. Credit Card Billing City \_\_\_\_\_
6. Credit Card Billing State & Zip \_\_\_\_\_
7. Cardholder Telephone Number \_\_\_\_\_
8. Name of Bank issuing Credit Card \_\_\_\_\_
9. Ship To Name (if not as above) \_\_\_\_\_
10. Ship To Street Address \_\_\_\_\_
11. Ship To Billing City \_\_\_\_\_
12. Ship To Billing State & Zip \_\_\_\_\_

Legal Signature: I, \_\_\_\_\_ hereby authorize  
Aviation Partners Group Inc to charge my product or services against my above credit card in  
the amount of **\$aaaaaaaaaaaaa U. S. Dollars** plus sales tax and shipping as applicable.

Date: \_\_\_\_\_

**PLEASE FAX THIS COMPLETED FORM TO: (941) 637-0388**