

## YACHT ORDER AND PAYMENT

**Please sign & complete this form to authorize Allsupply Logistics Inc or Allsource Export to make a onetime debit to your card provided below.**

Yacht Name:

Contact/ Captain:

Telephone Number:

Email:

Boat Location:

**Boat clearance certificate available and in date:**

Yes

No

**Captain/Owner/ Master/Agent available for signature:**

Yes

No

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Order/Product Details:

Air / Sea Freight:

Urgency:

**I Authorize Allsupply Logistics Inc or Allsource Export Inc to take payment from card details indicated in this authorization form. By signing this form, you give us permission to debit your account for the amount indicated on your invoice issued to you. This is permission for a single transaction only This payment authorization is for goods / services described above.**

### Card details for payment:

Card type:

Card Number:

Expiry Date:

CVC Code:

Card Holders Name:

I certify that I am an authorized user of this card.

Signature

Date