Limousine Lifestyles

"Because You're Worth It!"

Payment Processing Form

Payment: Cash ( ) Credit Card ( ) Money Order ( )

Card Holders Name	*Billing Address*
Credit Card Type *Discover MasterCard Visa American Express*	*City State Zip*
Credit Card Number	*Security Code: Visa / MasterCard / Discover* *3 Digit Code on back of Credit Card* ____ ____ ____
Expiration	*Security Code: American Express* *4 Digit Code on front of Credit Card* ____ ____ ____ ____

	Estimated	***Actual***
Hourly Rate Charges		$_____.____
Trip Hours from Page 1	*3 4 5 6 7 8 9 10 11 12* _____	*3 4 5 6 7 8 9 10 11 12* _____
Limousine Rental Charge	$_____.____	$_____.____
Fuel Surcharge (9%)	$_____.____	$_____.____
Gratuity (15%)	$_____.____	$_____.____
Total Charges / Balance Due	$_____.____	$_____.____
Deposit (50%)	$_____.____	
Additional Charges:		$_____.____

I, (Card Holder)_____hereby authorize Limousine Lifestyles, LLC to provide service for (Passenger(s) Name)_____as stated in this Service Contract, and to charge the services to my credit card account for the amount of $_____.____. I also understand that charges for (extra time, damages, stolen items or extensive cleaning) will be charged to my card provided above.

Signature: _____Name (Print)_____Date_____

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