



CREDIT CARD AUTHORIZATION

I AUTHORIZE KAP Freight LLC, to charge the following: described credit/debit card for authorized approved purchases relating to any KAP Freight LLC Dispatching Service charges, All payments for any other services we offer will be verified prior via TEXT or EMAIL approval by company owner. This authorization will remain valid until written termination signed and dated by KAP Freight and Carrier. I acknowledge that I will receive email notifications when dispatch debits my account on a weekly basis. In the event that a load, accepted by me, is rescheduled or canceled for reasons other than carrier, shipper, or broker issues, I understand that I am still obligated to pay dispatch according to the terms outlined above. Any exceptions require an agreement with KAP Freight, LLC.

Card Holder's Name on Card: _____

Credit/Debit Card Type: _____ Visa _____ MasterCard _____ Amex _____

Credit/Debit Card Number: _____

Ex. Date: _____ Security Code _____

Cardholders Contract Information:

Billing Address _____

City: _____ State: _____ Zip Code: _____

Phone# _____ Cell # _____

MC # _____ Company Name: _____

E-mail address (please print clearly) _____

Signature _____ Date: _____

Printed Name _____ Date: _____