

GILBRIDE LIMOUSINE INC.

1015 UNDERWOOD RD

OLYPHANT PA 18447

PHONE: (570)307-5466 FAX: (570)307-4227

E-mail: gilbridelimo@aol.com

Dear Valued Client,

For your protection and to contribute to our continuing efforts to reduce credit card fraud, we have established a new security procedure. We appreciate your cooperation and understanding in regards to this procedure.

I hereby authorize Gilbride Limousine Inc. to charge the following amount to my credit card.

(Credit card type)	(Account number)
(Expiration date)	(3 digit security code)
	(Total amount)

Date of Service: _____ Vehicle: _____

Name as it appears on Credit Card: _____

Address of Card Holder: _____

I understand that if the service exceeds the original agreement, overtime charges may be charged to my credit card. I will be sent a receipt reflecting overtime charges. I also understand that there is a non-refundable retainer of \$_____ in order to reserve a vehicle. If I choose to cancel a reservation, I understand that I will be charged the full amount. All vehicles are non-smoking. I understand that a charge of **\$350.00** will be charged if any smoking, damage, or sickness occurs in the vehicle.

Signature: _____

Date: _____

Please return by fax to (570)307-4227 or by e-mail to
gilbridelimo@aol.com

From: _____ Fax#: _____

*By sending this contract via e-mail, the e-mail will hold as Legal signature for the event.