



ON FILE ONLY

Credit Card Information Form

Date _____

Name of Contact Person _____

Name of Company _____

Phone # _____

Fax # _____

Card
Number _____

Expiration Date _____

CVV2 Number (3 digit number on back of card) _____

Name on Credit Card and Billing Address (where the credit card statement is sent)

Company Address (If different than Cardholders address)

I hereby authorize YRC Freight to keep my credit card on file for the purpose of charging shipments I authorize to the card. Please fax to 913-266-4042.

Cardholder Signature Date