



Date: \_\_\_\_\_

Subject: Transfer of Card Charges  
To: Corporate Card Division  
Fax: 954-503-6467

Please **CREDIT** American Express Card: \_\_\_\_\_

Belonging to: \_\_\_\_\_

Please **DEBIT** American Express Card: \_\_\_\_\_

Belonging to: \_\_\_\_\_

American Express Card	Debit	Credit
Totals		

The Vendor Name is: \_\_\_\_\_

The Airline Ticket number is: \_\_\_\_\_

The Vendor Name is: \_\_\_\_\_

The Hotel Deposit/Guarantee number is: \_\_\_\_\_

**Reason for Transfer**

- This office received the wrong profile.
- Incorrect Card used at time of sale.
- Other \_\_\_\_\_

I hereby certify that both Card members are aware of this transfer.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

ARC Number: 11792561

**Classic World Travel—American Express Travel Representative**  
**200 Commerce Drive**  
**Peachtree City, GA 30269**  
**770-487-9529 800-777-9529 770-487-9645 Fax**

