



OLD UNITED
INSURANCE COMPANIES
(d/b/a VANTAGE CASUALTY COMPANY IN THE STATE OF CALIFORNIA)

CREDIT CARD AUTHORIZATION FORM

I _____ authorize Old United Casualty Company to charge my credit card listed below for the premium due on a marine insurance policy in the amount indicated below. (The charge card will appear as "Old United Casualty Company" on your credit card statement.)

- Visa
- Mastercard
- Discover

Card Number _____ Expiration Date _____

Total to be charged to credit card(Full Premium Payment Only) \$ _____

Purchases Signature: _____ Date: _____

Policy number if applicable _____