

*Serving San Francisco*



*Since 1928*

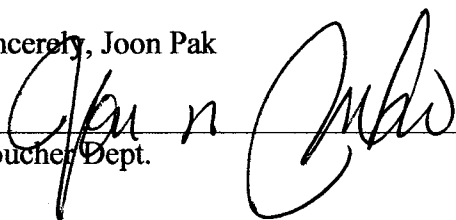
2230 Jerrold Avenue – San Francisco, Ca. 94124 – Phone: 415.401.1408 Fax: 415.282.1706

Enclosed please find our application for voucher billing with Luxor Cab Company. Kindly read the conditions set and if you are in agreement with our policy please sign, date and return the application to us. In the mean time, if I can be of any assistance to you or should you have any questions, please feel free to contact me at (415) 401-1408 or fax me at (415) 282-1706.

Thank you for choosing Luxor Cab Company for your future transportation needs. We look forward to your business.

Sincerely, Joon Pak

Voucher Dept.



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**VOUCHER ACCOUNT REQUEST FORM**

**BILLING ADDRESS:**

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EXT: \_\_\_\_\_

**ADDRESS WHERE VOUCHERS SHOULD BE MAILED**

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EXT: \_\_\_\_\_

**AUTHORIZED PERSONNEL TO HANDLE DISTRIBUTION OF VOUCHERS**

FULL NAME: \_\_\_\_\_

We, the above named company, request that LUXOR CAB COMPANY open a voucher account on our behalf and we understand and agree to abide by certain conditions set fourth.

- \$300.00 Minimum on Monthly Billing.
- A 1.5% finance charge per month will be charged on all over due balances.
- Luxor's billing cycle will be at the end of each month. Statements can not be broken down into separate accounts or billed other than monthly.
- It is also understood that we are liable for all cab fares once the vouchers are in our possession.
- A 6% surcharge for postage and handling will be added to the monthly statement.
- Fee is waived for properly documented non-profit organizations.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

**Note: This is the only copy you need to return to Luxor Cab. Thank You.**

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<b>LUXOR CABS</b>		PHONE: <b>282-4141</b>		SAN FRANCISCO, CA 94124	
2230 JERROLD AVENUE					
DATE:	ISSUED BY:	<i>YOUR Account Number</i> #000 - Company Name			
(1)	(2)				
TRANSPORTATION FOR:		M E T E R	TRIP		
1. (5)	T I P		Started At (3)		
2.			Then To (1) (4)		
3.			Then To (2)		
4.			Then To (3)		
5.	TOTAL	(6)	Then To (4)		
			Then To (5)		
FOR DRIVER USE ONLY:					
			Name	Cab No.	

1. FILL IN DATE
2. ENTER NAME, INITIALS OR DEPT.
3. ADDRESS TO BE PICKED UP AT
4. ADDRESS OF DESTINATION
5. NAME OF PARTY TO BE PICKED UP
6. SHOULD BE CROSSED OUT IF NO TIPPING IS ALLOWED

**IMPORTANT**

\*\*\* VOUCHERS SHOULD BE TREATED WITH THE SAME CARE AS A BOOK OF CHECKS. HANDING OUT A BLANK VOUCHER IS MUCH LIKE HANDING SOMEONE A BLANK CHECK THAT CAN BE USED TO PAY FOR A CAB FARE ANYWHERE.

VOUCHERS ARE THREE PART. REMOVE PINK COPY FOR YOUR RECORDS. ORIGINAL WHITE COPY, WILL BE SENT TO YOU WITH YOUR BILLING STATEMENTS.

DISPATCH WILL REQUIRE THE NAME, ADDRESS AND ROOM OR APARTMENT NUMBER OF PASSENGER(S). ANY SPECIAL REQUESTS SHOULD BE MADE AT THE TIME OF ORDER.

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