I ACKNOWLEDGE RECEIPT OF TICKET(S) AND/OR COUPON(S) FOR RELATED CHARGES DESCRIBED HEREON AND AM AWARE OF APPLICABLE RESTRICTIONS AND/OR PENALTIES AS SHOWN ON SUCH TICKET(S) AND/OR COUPON(S).

X

UNIVERSAL CREDIT CARD CHARGE FORM

CARRIER CODE

1. AGENT COPY

DATE OF ISSUE

IF EXTENDED PAYMENT APPLICABLE, CIRCLE NO. OF MONTHS

3 6 9 12 _____

DATE AND PLACE OF ISSUE 99

NAME OF PASSENGER IF OTHER THAN CARDHOLDER

OTATO NO.

CONNECTION OF PASSENGER WITH SUBSCRIBER

APPROVAL CODE

COMPLETE ROUTING	FARE BASIS	CARRIER	AIRLINE	FORM	SERIAL NO.

TICKETS NOT TRANSFERABLE
NO CASH REFUNDS

CREDIT CARD NAME/CODE

FARE	TOTAL	ROUTE CODE
TAX		
EQUIV. AMT. PD.		

GCF AIRLINES REPORTING CORP. 7-99 STOCK 1201