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Credit Card Payment Authorization



(MasterCard, VISA, or American Express only)

| | |
|---|--|
| Credit Card Type | <i>Please circle one</i> <input type="radio"/> MasterCard <input type="radio"/> VISA <input type="radio"/> AMEX |
| Credit Card Number | |
| Expiration Date | <i>(Month/Year)</i> |
| Name as Appears on Card | |
| Billing Address | Street |
| | City |
| | State |
| | Zip |
| | |
| Amount to be Charged | \$ |
| Today's Date | |
| Signature of Cardholder | |
| <i>Office Use Only:</i> Authorization Number | |
| Representative | |