

**SZABO SAMPLE  
OF  
CREDIT CARD AUTHORIZATION FORM**

Account Number \_\_\_\_\_

For Your Account With: \_\_\_\_\_

Card Type (circle one):    M/C    VISA    DISCOVER    AMEX

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

CVS Code: \_\_\_\_\_

(Visa/MC/Discover: 3 digits, found on back of card; American Express: 4 digits found on front of card)

Card Holders Name: \_\_\_\_\_  
(Print exactly as it appears on the credit card)

Credit Card Billing Address: \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Number :(     ) \_\_\_\_\_ - \_\_\_\_\_

Payment Amount: \$ \_\_\_\_\_

One- time Credit Card Payment (date): \_\_\_\_/\_\_\_\_/\_\_\_\_

Multiple Credit Card Payments (dates):

\_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_

Card Holder Signature: \_\_\_\_\_

Card Holder Name (PRINT): \_\_\_\_\_

Date of Signature: \_\_\_\_/\_\_\_\_/\_\_\_\_

**THIS PAYMENT WILL APPEAR ON YOUR CREDIT CARD STATEMENT AS ("COMPANY NAME")**

FOR "COMPANY NAME" USE ONLY:

AUTHORIZATION CODE

PROCESSING DATE

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**PLEASE KEEP A COPY OF THIS FORM FOR YOUR RECORDS**