

PALM BEACH COUNTY PUBLIC SAFETY DEPARTMENT

Enhancing the safety and well-being of our community

CONSUMER AFFAIRS

50 South Military Trail
Suite 201
West Palm Beach, FL 33415
561-712-6600
Fax: 561-712-6610

Credit Card Authorization Form

Credit Card Information				
Card Type:	□ MasterCard	□VISA	□ Discover	□ AMEX
Cardholder Name (as shown on card):				
Card Number Once the co	r (LAST 4 DIGIT ompleted form is re	CS ONLY):	er will be contacted t	o provide the 12 digits
Expiration Date (mm/yy):				
I,full of \$	for	, authorize the	e use of the credit card	l below for payment in
Customer Sig	gnature		Date	
Cardholder F	Phone Number: ()		