COLDWELL BANKER
VANGUARD REALTY

## Credit Card Authorization Form

*Credit Card Type*

□ Visa □ American Express

□ Master Card □ Discover

*Name as it appears on Card:* _____

*Credit Card Mailing Address:* _____
Street

_____
City State Zip

*Credit Card Number:* _____

*Expiration:* _____
mm/yyyy

*Three-Digit Authorization Code (back of card):* _____

*Maximum Amount Authorized to Charge:* _____

*Authorization to Auto Pay Future Invoices:* □Yes □No

***Approval:*** _____
Signature Date

Complete all information and return to:
Accounting at 1401 Kingsley Ave
or E-mail to dwidener@cbvfl.com
or FAX to Accounting at 904-264-9577

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