

**Payment By Credit Card Authorization Form**

House Finder A/C # \_\_\_\_\_ Date: \_\_\_\_\_

Reference # (if applicable) \_\_\_\_\_ Sales Rep: \_\_\_\_\_

*I, \_\_\_\_\_, hereby, authorize House Finder to charge to the following described credit card in the amount and at the frequency indicated below.*

Card Holder's Name (as appears on card): \_\_\_\_\_

Company: \_\_\_\_\_  Personal Card  Corporate Card

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (        ) \_\_\_\_\_

Email Address: \_\_\_\_\_

|                                           |
|-------------------------------------------|
| Card Type:                                |
| <input type="checkbox"/> VISA             |
| <input type="checkbox"/> MasterCard       |
| <input type="checkbox"/> Discover         |
| <input type="checkbox"/> American Express |

**Charge Frequency & Amount Authorized:**  Contract Deposit  Payment

Charge Per Advertisement  Quarterly  Semi-annually  Annually

\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**Authorization Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please provide a copy of your business card to fix your information , and then via fax to us: 800-232-5936

Thank you for your support!

\*House Finder will keep all information entered on this form strictly confidential.