

Credit Card Payment Authorization

Name: _____

Credit Card #: _____
(we cannot accept American Express)

Expiration Date: _____

Verification Code (three digits on the back of the card): _____

Billing Zip Code: _____

By signing this form I give Keller Williams Realty Natomas authorization to charge my credit card for my office billing on the 20th of every month.

Signature: _____ Date: _____