



TAX CONSULTING AND MORE

Bookkeeping ~ Income Tax Preparation ~ Payroll
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CREDIT CARD PAYMENT AUTHORIZATION FORM

Amount: _____

Card#: _____ ~ _____ ~ _____ ~ _____

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Type of Card: Visa _____ MasterCard _____ AMEX _____ Discover _____

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SIGNATURE: _____ DATE: _____

By signing above, I certify that all information provided is correct and I authorize Tax Consulting and More to charge the amount stated above related to Bookkeeping/Payroll or Income Tax Preparation Services. For payroll clients, the amount listed above will be automatically charged to this credit card every month following payroll services. To cancel this authorization you need to give us a written notice within 30 days. A copy of this will also serve as an original signed authorization. Please keep this as your receipt.

3520 Long Beach Blvd. Suite # 212, Long Beach CA 90807
Office: 562-427-4536 ~ Fax: 562-612-7102
Brendastcm@gmail.com