CITY OF MILTON - 1 139 SMITH STREET, MILTON WV 304-743-3032 X211 E-MAIL: FINANCECLERK@CITYOFMILTONWV.COM

Credit Card Authorization Form

Name on the Card:	
Type of Card: Visa MC Other	AmEx Discover
Account Number	
Expiration Date	
Security Code	<u></u>
Billing Address	
City, State, Zip Phone Number	
Order/Invoice Number Item(s) Purchased	
Amount to be Charged	
By signing this form, you authorizeto charge your card for the amount listed above.	
Signed:	Date: