

Monterey County Association of REALTORS®

VISA/MASTERCARD
CHARGE AUTHORIZATION

Please complete and return via fax to MCAR for processing.

Carmel/Monterey FAX: (831) 393-8669

Salinas FAX: (831) 422-9539

I, _____ authorize the Monterey
Please Print Name

County Association of REALTORS® to charge my credit card in the
amount of \$_____.

This amount is for: _____
Purchase/Charge Description

Credit Card Number: _____

Expiration Date: _____ / _____
Month Year

IN ORDER TO PROCESS YOUR CHARGE, PLEASE PROVIDE US
WITH YOUR CREDIT CARD BILLING ZIP CODE: _____

Signature: _____ Date: ____ / ____ / ____

*The purpose of this form is to verify a charge authorization.
Law requires a specified amount and signature from the
cardholder before any charge(s) can be processed.
Thank you.*

