POLICE BENEVOLENT ASSOCIATION
POLICE DEPARTMENT, COUNTY OF NASSAU, N.Y.
89 E. JERICHO TURNPIKE • MINEOLA, N.Y. 11501-3106 • 516-294-6230
• 516-742-0519 FAX

Credit Card Authorization Form

Credit Card Information
Card Type: ☐ MasterCard ☐ VISA ☐ AMEX ☐ Other _____
Cardholder Name (as shown on card): _____
Card Number: _____
Expiration Date (mm/yy): _____ CVC _____
Cardholder ZIP Code (from credit card billing address): _____

I,_____, authorize_____to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

_____ _____
Customer Signature Date

****ALL CREDIT CARD TRANSACTIONS WILL HAVE A 3.99% SERVICE FEE APPLIED****

GCC/IBT C621