**ROTARY CLUB OF FAIRBANKS**

**P.O. Box 72114, Fairbanks, AK 99707**

**(907) 456-8115 – Wilson and Wilson CPA**

**MEMBER CREDIT CARD AUTHORIZATION**

**AUTO PAY ONLY**

Date:

AMOUNT: . (Do not enter for auto-pay)

Name Listed on Card:

Billing Address:

City: State: Zip:

Contact Phone: (907) - Email:

Card Number: - - - -

Exp Date: / Visa Master Card CVV Code:

Signature:

Card holder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and

Agrees to perform the obligations set forth in the Cardholder’s agreement with the issuer.

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