



**Serving New York and New Jersey Members**

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Office: 518-436-9637 | Direct Line: 919-387-1221 | Fax: 919-249-1394

[www.NortheastMEP.org](http://www.NortheastMEP.org)

**CREDIT CARD CHARGE AUTHORIZATION FORM – FAX to 919-249-1394**

**The credit card form must be filled out completely, or payment will be declined and not processed.**

Date: \_\_\_\_\_

Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_



(CIRCLE CARD TYPE or write choice here \_\_\_\_\_)

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

V-Code (3 digits) \_\_\_\_\_  
(Back of card, Amex is 4-digit code on front of card)

Name on Credit Card: \_\_\_\_\_

Billing Address of Credit Card: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Charge Amount \$ \_\_\_\_\_ Item Purchased: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

EIN: 11-3043763