## FORM 50 CREDIT CARD PROCESSING FORM

NAME OF AGENT:		FORM 50#:
COURT/AGENCY: Justice of the Peace C	ourt – Form 50 Fee	
COMPANY NAME:		
NAME ON CREDIT CARD:		
BILLING STREET ADDRESS:		
CITY:	STATE:	ZIP:
CREDIT CARD NUMBER:		_
CREDIT CARD EXPIRATION DATE :		-
TYPE OF CREDIT CARD: VISA	MASTERCARD	DISCOVER
LAST THREE DIGITS OF NUMBER SEQUE	NCE LOCATED IN SIGNATU	RE BOX:
TO PROCESS PAYMENT BY TELEPHON CONTACT:		
AMOUNT TO BE PAID WITH CREDIT CAI	RD: \$	
I hereby authorize the above credit card	l be used for payment of the	e Form 50 fee.
Signature:	Date	):
By signing this form, I hereby authorize the Just application fee. I understand that all informatio		
NOTE: This form could be used for multip reflect total fees accepted.	le Form 50 applications; the	amount charged may be adjusted to
Initial of User Processing Payment		