## **Credit Card Authorization**

Department of State Division of Licensing Services P.O. Box 22001 Albany, NY 12201-2001

The Department of State's Division of Licensing Services accepts MasterCard and Visa for payment of fees. To pay fees using a credit card, simply complete and sign this form and attach it to your application.

We process credit card payments upon receipt.

Please PRINT CLEARLY in blue or black ink.

APPLICANT'S INFORMATION		
Please enter the name of the person or company this payment	is being made for.	
FIRST NAME: MIDDLE NAM	IE:	
COMPANY NAME:		
UNIQUE I.D.NUMBER (If applicable)		
CREDIT CARD INFORM	MATION	
NAME AS IT APPEARS ON CARD:		
STREET ADDRESS:		
APT / UNIT / PO BOX:		
CITY:	STATE:	ZIP+4:
Total Amount Due: \$		
Please charge to the following credit card:		
MasterCard Visa Expiration Date: (Mont	(Year)	
Credit Card No.:	-	
If there is a problem processing this payment, we would lik	e to be able to reach	you by phone.
Optional: Daytime telephone number: (	)	
Cardholder's Signature:		
Date:		