

Payment Authorization

For YOUR protection, incomplete Payment Authorization Forms will not be processed.
All information will be verified before charges are made to your credit card.

1. Select a Payment Option

Monthly Auto-Debit	<input type="checkbox"/>	I hereby authorize Tracers Information Specialists, Inc. to charge the below-listed credit card each month for our system usage.		
Payment of Past Due Accounts <i>This option is only available to accounts that have been approved for Net/15 Invoicing.</i>	<input type="checkbox"/>	I hereby authorize Tracers Information Specialists, Inc. to charge the below-listed credit card in the event that my account becomes thirty (30) days or more past due.		
Single-Payment Charge <i>Select this option for a one-time payment of current or past-due invoices.</i>	<input type="checkbox"/>	I hereby authorize Tracers Information Specialists, Inc. to make a one-time charge to the below-listed credit card.		
		Amount:	\$	Date:

2. Provide Your Credit Card Information

Credit Card #:	-- -- --	Expiration Date:	/
Name on Card:		CVV Code:	

3. Supply Us With Complete Cardholder Address Information

Billing Address:				
City:		State:		Zip:
Phone:		Fax:		
E-mail:				
Signature:				

4. Photocopy Your Credit Card and Government-Issued ID Below

<p><i>Please place your credit card in this box before photocopying this form.</i></p> <p>If your credit card or ID appear very dark when photocopied, we will not be able to read the information on them once it is faxed.</p> <p>Please use your photocopier's lightest setting and recopy them on a separate sheet of paper.</p>	<p><i>Please place your ID in this box before photocopying this form.</i></p> <p>We recognize that your time is valuable. However, the extra steps we take to verify our customers' identities helps to keep our data secure, which helps to ensure that we will be able to continue to supply you with current, complete information such as full SSNs.</p> <p>We appreciate the time you've taken to supply us with the information we need in order to keep supplying you with the information <u>you</u> need.</p>
--	--

5. On Separate Sheet, Photocopy The Back Of Your Credit Card

6. Fax Completed Payment Authorization Forms to 877-820-8126.

Please take a moment to review. Have you supplied ALL the requested information? Incomplete Forms or Forms that do not include photocopies of a government-issued identification card (such as driver's license or passport) and the front and back of the credit card will NOT be processed.