



Colorado Bureau of Investigation Sex Offender Unit

CREDIT CARD AUTHORIZATION FORM

(BLUE INK PLEASE)

I authorize you to bill my credit card account for \$ _____

***If you miscalculate the “total amount due”, your card will automatically be billed the correct amount.
Please check your invoice when your statement arrives for the actual amount billed to your card.**

CIRCLE CARD TYPE



Card Number: _____

Expiration Date: _____

Phone Number: _____

Name

Signature