145, rue Richmond, Charlottetown î.-P.-É. Canada C1A 1J1 (902) 628.1864 145 Richmond Street Charlottetown P.E.I. Canada C1A 1J1 confederationcentre.com

Credit Card Authorization Form

One-Time & Repeat Gifts

CARDHOLDER INFOR	MA'	TIC	N
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Name:		
Billing Street Address:		
City:	Prov:	Postal Code:
Email		
Telephone:		
GIFT INFORMATION		
Fund Name or Gift Purpose	<u> </u>	
□ I authorize a one-time ch	narge against my cred	it card for the follow amount \$
□ I authorize a recurring ch	narge against my cred	lit card for the following amount
\$ once eve	ery day(s)/w	veek(s)/month(s)/year(s) beginning
(MM/DD/YYYY)	and ending after	payments.
CREDIT CARD INFORMATION	ON	
Credit Card Type: ☐ Maste	erCard 🗆 Visa 🗆 Ame	erican Express Other
Number:		
Expiration Month:	Expiration Year:	
Cardholder Signature X		Date
Security Code:		, , , , , , , , , , , , , , , , , , ,

Form Version: 2017-1