

# Credit Card Authorization Form



Foothills County  
309 Macleod Trail, Box 5605, High River, AB T1V 1M7.

[www.Foothillscountyab.ca](http://www.Foothillscountyab.ca)  
Tel: 403-652-2341  
Fax: 403-652-7880



Visa



Mastercard



American Express

- |   |                                   |                                   |
|---|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Assessment       | <input type="checkbox"/> Gas      | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Business License | <input type="checkbox"/> Mapping  | <input type="checkbox"/> PSDS     |
| <input type="checkbox"/> Electrical       | <input type="checkbox"/> Planning | <input type="checkbox"/> Other    |

Card Holder Name:
Business Name:
Invoice #:
Amount:
Visa / MC / AMEX #:
Security Code# (Back of Card):
Expiry Date:
Phone #:
Authorized Signature:

The personal information collected on this Credit Card Authorization form is collected for the purpose of processing payments. This information is authorized under the Municipal Government Act and the Protection of Privacy Act (POPA), Section 4(c). Inquiries about the collection of this information should be directed to the Foothills County Access to Information Coordinator, P.O. Box 5605, High River, Alberta T1V 1M7. Telephone 403-652-2341

For Foothills County Office Use Only	
Authorized by:	
Date:	
Receipt #:	