**TOWN OF RED RIVER**
(575)754-2277
www.redriver.org
100 East Main Street
PO Box 1020
Red River, NM 87558

# CREDIT CARD AUTHORIZATION

I, _____authorize the Town of Red River to debit my credit card for account
*(Customer's Name)*
#(s)_____in the amount of my utility bill each month.
*(Utility Account #(s))*

**I understand that I am responsible for updating any outdated credit card information and that failure to do so will constitute a penalty assessed to past due balances.**

---

SERVICE ADDRESS:

Address_____

City_____State_____Zip_____

PHONE NUMBER_____

BILLING ADDRESS:

Address_____

City_____State_____Zip_____

E-MAIL_____

---

TYPE OF CREDIT CARD: ☐VISA ☐Master Card ☐Discover ☐AMEX

CREDIT CARD NUMBER_____

V- CODE (3-digit number on back of credit card)_____

EXPIRATION DATE_____

STARTING DATE_____

---

****Your Credit Card will be charged within 4 days of the due date of your utility bill.****
****This credit card authorization will only expire upon written request.****

_____
*(Card Holder's Signature)*

**State of_____ )**
**) ss.**
**County of _____ )**

**The foregoing instrument was acknowledged before me this _____day of_____, 20_____.**

_____
**Notary Public**
**My commission expires_____**

Revised October 2015