Credit Card Authorization Form

Date: _____

Please Print

Agent's Name: _____CALBRE#:_____

Office Name: _____

Payment for:

☐ Reciprocal Listing Input Fee ($50)……$_____

☐ Additional Property Photos ($4 each)……Qty. _____$_____
(Main property photo is uploaded at no charge)

Total: $_____

Payment Method:

☐ Visa # _____Expiration Date: _____

☐ Master Card # _____Expiration Date: _____

☐ American Express # _____Expiration Date: _____

Name on card: _____

Signature: _____

Contact Phone Number (_____)_____

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Email: Reciplist@corp.themls.com