

VISA / MASTERCARD AUTHORIZATION FORM

Client Information (Office Use Only):

Client (Community) Name: _____ Client #: _____
 Client Representative: _____

Apply below Charge/Debit Amt as follows:

Name (applicants, cosigners, etc)	Unit #	Service Type	Amount
Total			

Credit Card Information: Visa: Master Card:

Card Number: -- -- --

Cardholder Name:

Please print name (exactly as it appears on the card)

Card Exp Date: Phone Number:

Month/Day/Year

(NNN) NNN-NNNN

Security Code: (3 digit code found on back of card) Amount: \$

Billing address: (Street Address)

(City, State & Zip)

Cardholder Authorization:

I authorize The Information Source, Powered by Moco, Inc. to place the above charge against my account. I understand that this fee is **non-refundable**, even if my application to rent is denied.

X

 Cardholder Signature

 Transaction Date:

Fax form with rental application to Moco, Inc. at 206-505-7480 or 1-800-257-8893.

Moco (Internal) Use Only

Authorization Code: _____