

One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize National Asphalt Pavement Association (NAPA) to make a one-time charge to your credit card listed below.

By signing this form you give us permission to charge your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

(full name)	authorize NAPA to o	charge my credit ca	rd
account indicated below for _	(amount) on or after	(date)	This payment is for
NAPA Safety Online Training N (description of goods/ser			
Billing Address		Phone#	
City, State, Zip		Email	
Account Type: Visa	☐ MasterCard	AMEX	Discover
Account Type:			
Cardholder Name			

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. This charge will appear on the credit card statement under the name "ARTBA SCTPP." I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.