

CREDIT CARD AUTHORIZATION FORM
Greening the City Conference
November 6-8, 2009
Cambridge, MA

Date: _____

Name: _____

Billing Address: _____

Circle Card Type: American Express Discover MasterCard Visa

Credit Card Number: _____ Expiration Date: _____

Amount to charge: \$ _____

Cardholder Signature _____

Office use only:

General Ledger number _____ Department name _____

For: (postage, fees, etc.) _____ Date: _____

Bank debit cards typically have a daily withdrawal limit. Please check with your bank regarding your debit card daily limit.