campbelltown city council	FINANCIAL SERVICES Fax to: (02) 4645 4472

Authorisation Form - Credit Card Payments

Privacy Statement

The information requested by Council on this form may constitute personal information under the *Privacy and Personal Information Protection Act 1998*. Council is allowed to collect the information from you to consider this matter. Supplying this information is voluntary. However if you cannot or do not wish to provide the information, we may not be able to consider the matter. If you need further details, please contact the Privacy Officer, Campbelltown City Council, cnr Queen and Broughton Streets, Campbelltown.

Please charge my credit card for the following services:	

MASTERCARD ☐ VISACARD ☐

Credit Card No. ___ ___ ___ ___ / ___ ___ ___ ___ / ___ ___ ___ ___ / ___ ___ ___ ___

Amount $ _____ **All credit card payments will incur a Merchant Service Fee surcharge of 0.60%.**

Card Expiry Date ___ ___ / ___ ___ Cardholder's Name _____

Cardholder's Signature _____Contact Phone Number _____

OFFICE USE ONLY

Internal Reference Code: Description:

Fax completed form to (02) 4645 4472 (Forms will not be accepted by email)