

# RiCora Financial Services

VISA  MasterCard  AMEX  DISCOVER

Name As It Appears On Card: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Amount of Charge: \$ \_\_\_\_\_

Card Number: \_\_\_\_\_

Security Code: \_\_\_\_\_

Address: \_\_\_\_\_

Date To Charge Card: \_\_\_\_\_

Amount To Charge: \$ \_\_\_\_\_

Number of Payments: \_\_\_\_\_

I give RiCora Financial Services permission to charge my credit card as stated above.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: