

# Complete Notary Products, LLC

480 Town Center Street North, Suite 226  
 Mooresville, IN 46158

## Credit Card Authorization Form

Please complete this authorization form to receive your Notary Bond and/or E&O Policy.

Once form is completed you may send via email to [completenotaryproducts@gmail.com](mailto:completenotaryproducts@gmail.com) or fax to 317-534-3130.

Cardholder Name: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Credit Card Type:    \_\_\_ Visa        \_\_\_ Mastercard        \_\_\_ Discover        \_\_\_ American Express

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

Expiration Date: \_\_\_\_\_        CIN # (Last 3 digits on the back of the card) \_\_\_\_\_

Amount to charge \$ \_\_\_\_\_

I \_\_\_\_\_ authorize Complete Notary Products, LLC to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay this amount in accordance with the issuing bank card holder agreement. I understand that I will not be issued by Notarial Bond and/or E&O Policy until payment is received and processed.

Cardholder's Signature: \_\_\_\_\_

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