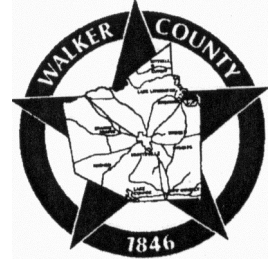




Walker County Clerk
Kari A. French
1100 University Avenue, Suite 201
Huntsville, Texas 77340
936-436-4922 Fax 936-436-4928
www.co.walker.tx.us



CREDIT CARD AUTHORIZATION FORM

Date: _____

Cardholder Name: _____

Business/Firm (Optional): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

**Note* The Zip Code must match the cardholder's billing address; if not, transaction will be declined.*

Email Address: _____

***Providing an email address will allow your receipt to be emailed to you. ***

Phone #: () _____ - _____

DEFENDANT: _____ CAUSE#: _____

Credit Card: ☐ Visa ☐ Mastercard ☐ Discover ☐ American Express

Name as it appears on Card: _____

Credit Card #: _____

Exp. Date: ____/____/____ 3 Digit Code: _____

Amount to Charge \$: _____

I, the undersigned, authorize Walker County Clerk's Office to charge my credit card above for agreed upon purchases. I understand that my information will NOT be saved to file for future transactions.

Authorized Signature: _____