

DPSST

CREDIT CARD AUTHORIZATION

508c

Confidential Fax (503) 373-1449

DPSST accepts credit and debit cards with the **VISA** or **MasterCard** logo. Credit card transactions may be authorized via this form. Please complete sections A, B, & C and submit via fax, mail or hand delivery – **DPSST will not accept a form submitted by email. DPSST does not keep credit card number information on file. A new form 508c must be submitted for each authorized payment.**

**SECTION A: CREDIT CARD HOLDER INFORMATION**

<b>A</b>	1. Name as it appears on card:	
	2a. Billing Address:	2b. City, State, Zip:
	3a. Mailing (Shipping) Address:	3b. City, State, Zip:
	4a. e-Mail Address (for transaction receipt):	4b. Verify e-Mail Address:
	5. Phone Number (    )	6. Fax Number (    )
	7. Printed authorized signer's name	8. Signature of authorized signer

**SECTION B: CREDIT CARD PAYMENT AUTHORIZATION**

	10a. Description (Fee type, copies, AR#, etc.)	10b. Name & DPSST # (if applicable/known)	10c. Amount *
<b>B</b>			

Please contact DPSST or visit [www.Oregon.gov/DPSST](http://www.Oregon.gov/DPSST) for the most recent fee schedule. Incorrect fee amounts may delay processing.

<b>TOTAL APPROVED:</b>	
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*\*Payments to DPSST may be non-refundable.*

**FOR DPSST USE ONLY**

Received:	PCA:	Object:
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Post Date/Initials:
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**SECTION C: CREDIT CARD NUMBER**

<b>C</b>	Credit Card Number:	Expiration date: MM/YY
	<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard	