



## North Carolina State Board of Certified Public Accountant Examiners

### CREDIT/DEBIT CARD PAYMENT AUTHORIZATION

Credit/Debit card payment cannot be processed unless all fields below are complete.

\_\_\_\_\_ MasterCard      \_\_\_\_\_ VISA      \_\_\_\_\_ American Express      Amount \$ \_\_\_\_\_

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

CVV/Card Security Code \_\_\_\_\_      Expiration Date \_\_\_\_\_  
(3-digit code for MC/VISA)      (MM/YYYY)  
(4-digit code for AmEx)

Exact Name on Card \_\_\_\_\_

Billing Address for Card \_\_\_\_\_  
Street or PO Box and City, State, Zip Code

Signature \_\_\_\_\_      Date \_\_\_\_\_

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