



GOVERNMENT OF
THE UNITED STATES VIRGIN ISLANDS

OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF BUSINESS AND FINANCIAL MANAGEMENT

1105 King Street • Christiansted, Virgin Islands 00820 • 340.773.6449 •
18 Kongens Gade • Charlotte Amalie, Virgin Islands 00802 • 340.774.2991 •

CREDIT CARD AUTHORIZATION FORM

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN IT TO OUR OFFICE BY **FAX: (340) 776-5039** OR BY REGULAR MAIL. *(Please provide a copy of your personal identification e.g. driver's license or passport)*

Date: March 20, 2015

Cardholder Name: _____

Contact Number : _____ - _____ - _____ Email: _____

Signature: _____

Billing Address: _____
_____ , _____ _____

Credit Card Type: VISA MASTERCARD ATM/ATH CARD

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date: _____ / _____

Card Identification Number (last 3 digits located on the back of the credit card):

Amount Charged: 22,303.07 (USD)

Apply Amount to: 2014 Property Taxes - Parcel 1-09803-0101-00