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### Credit Card Authorization

Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date \_\_\_\_\_ / \_\_\_\_\_

3 digit code located on the back of credit card: \_\_\_\_\_

Type of Credit Card:    Visa    MasterCard (Circle One)

I, \_\_\_\_\_ (full name as appears on the credit card) authorize Professional Tax Service to charge my credit card for monies I owe Professional Tax Service for services rendered in preparation of my tax return.

Credit Card Billing Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_

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

\_\_\_\_\_  
Date

**Tax returns will not be filed until payment is received in full.  
Thank you**