

AUTHORIZATION TO PROCESS CREDIT CARD CHARGES

The undersigned authorizes M&M Management on behalf of Hidden Creek Condominium Association, Inc. to process my charges, for background screening services, through Professional Screening Services, Inc. My credit card information is as follows:

- a. Name on front of card:_____
 - b. Credit Card Account Number:_____
 - c. Credit Card Expiration Date:_____
 - d. TYPE of Credit Card - Visa, MasterCard, or Discover:_____
 - e. 3 digit code on back of credit card:_____
 - f. Billing address zip code of card holder:_____
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Authorizing Signature of Client
(We accept typed signatures as authorization):

Authorizing Signature

Date

Application Fees for HCC are \$250 / person

A credit card fee of \$8.79 will be added to your charge.