

## **Credit Card Authorization Form**

I hereby authorize the Arcadia Association of REALTORS<sup>®</sup> to charge my credit card for the appropriate charges. I understand the authorization will apply only to the charge(s) that I have specified. I further understand it is my responsibility to update the AAR with new expiration dates and new credit cards I wish to use.

Date:	
Name:	_MLS ID#: <u>A</u>
Phone: ()	_
Type of Payment:	
<ul> <li>Annual REALTOR<sup>®</sup> Dues (N.A.R., C.A.R., A.A.R.)</li> <li>Housing Affordability Fund (\$10)</li> <li>(H.A.F. is an optional donation; please check if you would like to contribute)</li> <li>California Association of REALTORS<sup>®</sup> Housing Affordability Fund is able to fund</li> </ul>	programs that help REALTORS <sup>®</sup> clients
<ul> <li>through your generous support.</li> <li>REALTOR® Action Fund \$ (\$20 min.)</li> <li>(R.A.F. is an optional donation; please check if you would like to contribute)</li> <li>REALTOR® Action Fund (R.A.F.) raises money to advance the goals of our REAL the local, state, and federal levels of government.</li> </ul>	TOR <sup>®</sup> political action committees (PACs) at
Quarterly CRMLS fees This Quarter Only CRMLS Fees	
One Time Only Charge in the Amount of: \$ Payment:	
MasterCard Visa	
C.C. #:	CID #: Exp. Date: (Last 3 digits on back of card)
Signature:	
For your protection, digital signatures are <u>NOT</u> accepted.	
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