



## Small Business Legislative Council

4800 Hampden Lane, 6<sup>th</sup> Floor  
Bethesda, Maryland 20814  
Telephone 301.656.7603  
Fax 301.652.5412

### CREDIT CARD REMITTANCE FORM

Name of Cardholder:

\_\_\_\_\_

Last

\_\_\_\_\_

First

Company Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

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

Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Amount To Be Charged: \$ \_\_\_\_\_

Type of Card: VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_

DISCOVER \_\_\_\_\_ AMEX \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_

Date: \_\_\_\_\_

PLEASE DO NOT EMAIL THIS FORM; FAX TO 301.652.5412

OR MAIL TO

Ms. Katherine Glenn  
Small Business Legislative Council  
4800 Hampden Lane  
6<sup>th</sup> Floor  
Bethesda, MD 20814