

# Susko Wealth Management, LLC

## Credit / Debit Card Authorization Form

You can request to have your credit/debit card charged for services and products you purchase from Susko Wealth Management, LLC.

Please complete the following information if you would like to have your invoice paid by Visa or MasterCard.

By completing and signing this form, you authorize Susko Wealth Management, LLC to charge the amount of your invoice to the credit/debit card you've selected below.

Please circle our card type, fill in your name, company name (if applicable), account number, and expiration date as it appears on your card:

**Card Type:**            **Visa**            **Mastercard**

**Account Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_ **Invoice/Charge Amount:** \_\_\_\_\_

**Card Member Name:** \_\_\_\_\_

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

**Card Member's Signature:** \_\_\_\_\_

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

**Daytime Phone Number:** \_\_\_\_\_

**Invoice #:** \_\_\_\_\_ **Client Name:** \_\_\_\_\_

By signing this form, you authorize Susko Wealth Management, LLC to charge to your credit/debit card the amount indicated above. Also, you agree to pay this amount according to the terms of your credit/debit agreement.

Please fax, email, or mail the completed form to our office. Upon receipt of this form, the amount indicated will be charged to your credit/debit card. Please call us at (610) 706-0900 if you have any questions.

Thank you.

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[www.suskowealthmanagement.com](http://www.suskowealthmanagement.com)