

**FORM 50 CREDIT CARD  
PROCESSING FORM**

NAME OF AGENT: \_\_\_\_\_

FORM 50#: \_\_\_\_\_

COURT/AGENCY: Justice of the Peace Court – Form 50 Fee

COMPANY NAME: \_\_\_\_\_

NAME ON CREDIT CARD: \_\_\_\_\_

BILLING STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

CREDIT CARD NUMBER: \_\_\_\_\_

CREDIT CARD EXPIRATION DATE : \_\_\_\_\_

TYPE OF CREDIT CARD:      ☐ VISA      ☐ MASTERCARD      ☐ DISCOVER

LAST THREE DIGITS OF NUMBER SEQUENCE LOCATED IN SIGNATURE BOX: \_\_\_\_\_

TO PROCESS PAYMENT BY TELEPHONE, PROVIDE A POINT OF CONTACT AND PHONE NUMBER:  
CONTACT: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

AMOUNT TO BE PAID WITH CREDIT CARD: \$ \_\_\_\_\_

***I hereby authorize the above credit card be used for payment of the Form 50 fee.***

Signature:

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

*By signing this form, I hereby authorize the Justice of the Peace Court to charge my credit card account for the Form 50 application fee. I understand that all information on this form will be kept strictly confidential.*

NOTE: This form could be used for multiple Form 50 applications; the amount charged may be adjusted to reflect total fees accepted.

**Initial of User Processing Payment** \_\_\_\_\_

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

**Receipt Number:** \_\_\_\_\_