

National Baptist Convention, USA, Inc.

BAPTIST WORLD CENTER HEADQUARTERS

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CREDIT CARD AUTHORIZATION FORM

DATE:			
CARDHOLDER NAME :			
E-MAIL ADDRESS:			
CONTRIBUTION/PAYMENT DES	SCRIPTION:		
TYPE OF CARD:	☐ VISA	☐ MASTERCARD	☐ AMEX
CARD NUMBER:			
EXPIRATION DATE:		CHARGED AMOUNT:	
I AUTHORIZE THE NATIONAL BA	APTIST CONVENTION, U	JSA, INC. TO PROCESS THE ABOVE CHARGE ON	N MY CREDIT CARD.
CUSTOMER NAME (print)		Customer Telephone N	UMBER
CUSTOMER SIGNATURE			
ORDER NUMBER:		COMPLETED BY:	

FAX TO: 877-830-8533 Jeanette Tatman Office: 615-301-2224

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