

## 2023 MMBA Annual Conference Credit Card Authorization Form

<b>Credit Card Information</b>
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____
Card Number: _____
Expiration Date (mm/yy): _____          CVV: _____
Cardholder ZIP Code (from credit card billing address): _____

I, \_\_\_\_\_, authorize the Minnesota Municipal Beverage Association to charge my credit card above in the amount of \$\_\_\_\_\_.

\_\_\_\_\_  
Customer Signature    Date



