

## Credit Card Authorization



**Star H Equine Insurance**

Name of Cardholder: \_\_\_\_\_

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

City, State & Zip: \_\_\_\_\_

Credit Card No: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV2 # (3 digit on back): \_\_\_\_\_

Amount of Charge: \$ \_\_\_\_\_

I hereby authorize Star H Equine Insurance Agency to charge my credit card the amount listed above.

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