



CREDIT CARD PAYMENT AUTHORIZATION



**MAIL TO: CITY OF SPRINGFIELD
INCOME TAX DIVISION
P.O. BOX 5200
SPRINGFIELD, OHIO 45501**

TO CHARGE YOUR INCOME TAX DUE TO YOUR VISA, MASTERCARD OR DISCOVER, COMPLETE ALL BOXES AND MAIL WITH YOUR RETURN; OR MAKE YOUR PAYMENT ONLINE @ www.ci.springfield.oh.us

(CHECK ONE)  VISA  MASTERCARD  DISCOVER




TAXPAYER NAME	CREDIT CARD NUMBER
INCOME TAX ACCOUNT NO. (AS SHOWN ON RETURN)	EXPIRATION DATE (MM/YYYY)
PHONE NUMBER	CODE (3 DIGITS ON BACK OF CARD)
AUTHORIZED SIGNATURE	TOTAL AMOUNT AUTHORIZED
DATE	CARDHOLDER ADDRESS INCLUDING ZIP CODE

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