

**ORANGE COUNTY ASSOCIATION OF REALTORS
CREDIT CARD CHARGE AUTHORIZATION FORM**

Fax form to (949) 586-0382, Attention: Desmond

MEMBER NAME: _____ **MEMBER #:** _____
Last First

Credit Card # _____ **Exp. Date** ____/____/____
CID# _____

Set up for auto-pay:

AND / OR

Current Payment:

Dues

MLS Fees

Misc. Charges

Dues \$ _____.

MLS Fees \$ _____.

REALTOR® Action Fund (opt.) \$ _____.

Housing Affordability (opt.) \$ _____.

OCAR Cares (opt.) \$ _____.

Other (specify) \$ _____.

TOTAL \$.

REMOVE card from acct.

ADD/UPDATE card info. *Member Signature* _____ *Date:* ____/____/____

OR

Phone request taken by _____ Date: ____/____/____

FOR OCAR USE ONLY BELOW THIS LINE

Payment posted: ____/____/____ Date By _____

CC info. input / updated: ____/____/____ Date By _____

Sort Code (circle one):

1 A - E

2 F - J

3 K - O

4 P - T

5 U - Z

CHANGE MLS Status to ACTIVE