

If you would like to enjoy the convenience of automatic recurring credit card payments or a onetime credit card payment, simply complete the Homeowner Information, Payment Information, and Credit Card Information below and sign and date the form. The form can be emailed to [cphtreasurer@yahoo.com](mailto:cphtreasurer@yahoo.com) or dropped in the drop box at the Clubhouse. The mail carrier does not pick up mail from this box, they only deliver mail. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting Country Place HOA via email at [cphtreasurer@yahoo.com](mailto:cphtreasurer@yahoo.com) or by phone at 318-423-2158.

### Homeowner Information:

Account number: \_\_\_\_\_

Homeowner Email Address: \_\_\_\_\_

Product/service description: HOA dues

Homeowner Name: \_\_\_\_\_

Homeowner Address: \_\_\_\_\_

### Payment Information:

I authorize Country Place HOA to automatically bill the card listed below as specified:

Recurring or One Time Amount \$ \_\_\_\_\_

Frequency: (Put an "X" in only one of these)

Once \_\_\_\_ Twice per month \_\_\_\_ Monthly \_\_\_\_ Quarterly \_\_\_\_

Start on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

End on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

OR End when balance is paid in full

### Credit Card Information:

Card type: (Put an "X" in one)

MasterCard \_\_\_\_ Visa \_\_\_\_ American Express \_\_\_\_ Discover \_\_\_\_

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

Cardholder Zip Code: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code \_\_\_\_\_

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

\_\_\_\_\_  
Customer Printed Name

\_\_\_\_\_  
Date Signed