

Seminole County Tax Collector
Commercial Accounts
CREDIT/DEBIT CARD TRANSMITTAL

DATE _____/_____/_____

PAYMENT TYPE CREDIT DEBIT

CARD TYPE VISA DISCOVER
 MASTERCARD AMERICAN EXPRESS

CARD #

EXPIRATION DATE _____/_____ SECURITY CODE (3 DIGIT #)
(Back of Card) (Only American Express has a 4 digit code)

DEALERSHIP _____

AUTHORIZED CARDHOLDER _____

BILLING ADDRESS _____
(As shown on Card Statement) _____

DEALERSHIP PHONE # (_____) _____

SIGNATURE _____

* Completed transmittal form required to be submitted with each folder of dropped work.
** A 2.15 % third party convenience fee will apply to all credit card transactions. (\$1.00 minimum)
*** A \$1.50 third party convenience fee will apply to all debit card transactions – *if for any reason the card will not process as a debit payment, it will automatically be processed as a credit payment.*

For Office Use Only

TRANSACTION AMOUNT: \$ _____ AUTHORIZATION RESPONSE #: _____

CONVENIENCE FEE: **(2.15% or \$1.50)** \$ _____ PAYMENT ID #: _____

TOTAL CHARGE: \$ _____ CSR INITIALS: BATCH RECEIPT #: _____