

**JUSTICE COURT
Town of Cairo**

TOWN JUSTICE
Leland E Miller

PO Box 755
Cairo, NY 12413
Tel: (518) 622-3388 * Fax: (518) 622-0172

TOWN JUSTICE
Tanja Sirago

CREDIT CARD AUTHORIZATION

***NOTICE:** ALL CREDIT CARD PAYMENTS ARE SUBJECT TO A 3.5%
SERVICE FEE

CREDIT CARD: MasterCard ___ Visa ___ AmEx ___ Other ___

CARDHOLDER'S NAME: _____

CARD NUMBER: _____

EXPIRATION DATE: _____

BILLING ZIP CODE: _____

AMOUNT AUTHORIZED: _____

TELEPHONE NUMBER: _____

NAME AS IT APPEARS ON TICKET: _____

DATE OF BIRTH: _____

TICKET OR CASE NUMBER: _____

* I hereby accept the fine and/or surcharge amount(s) imposed by the Court and authorize payment thereof on the above-noted credit card. Note: Should a bank reject your transaction, a suspension will be issued without further notice.

Signature as it Appears on Card