



CREDIT CARD AUTHORIZATION

I, _____, hereby authorize Ameritrust Mortgage Corporation to charge my credit card for a Credit Report and/or Supplements in conjunction with a business purpose loan transaction.

Total amount or range being charged to card: _____

Additionally, I am aware that my initial charge may increase. If supplements are needed, please increase my range to: _____

Card Details

Card Type: Visa MasterCard AMEX Discover

Cardholder Name (as it appears on card): _____

Card Number: _____ Expiration Date (mm/yy): _____

3-Digit Security Code: _____

Billing Information

Billing Address: _____

Phone Number: _____ Email: _____

Cardholder Authorization

By signing this document, I acknowledge the charges described on this form, assume full responsibility for said charges, and agree to honor and abide by the terms of the payment. I acknowledge and accept Ameritrust Mortgage Corporation's Terms and Conditions.

Cardholder Signature

Date