



Desert Veterinary Medical Specialists
86 W Juniper Avenue #2 Gilbert, AZ 85233
Phone 480.635.1110
Fax 480.892.0540

The experts in compassionate care.

Credit Card Authorization

(American Express, Visa, Mastercard, or Discover)

I authorize *Desert Veterinary Medical Specialists* to charge my credit card for veterinary services provided for my pet.

I understand that I am giving the above named practice permission to charge my credit card without my signature on the charge slip.

Please print

Patient Name: _____

***Credit Card Billing Address:** Street: _____

City: _____ State: _____ Zip: _____

Client Phone Numbers: Home: _____ Cell: _____

Date(s) of Service: _____

Amount Authorized: _____

Type of card: Visa Mastercard Discover AMEX

Card Holder's Name: _____

Card Holder's Signature: _____

Date: _____

Card Expiration Date: _____

**** Card Security Code:** _____

Card Number: _____

* Billing address must include street, city, state, and zip and must match the billing address on file with the credit card being used.

** Visa, Master, and Discover have a 3 digit code on the back of the card (above the authorized signature area.) American Express has a 4 digit code on the front of the card.