



STATE OF MAINE  
 DEPARTMENT OF PROFESSIONAL  
 AND FINANCIAL REGULATION  
 BOARD OF LICENSING OF AUCTIONEERS  
 35 STATE HOUSE STATION  
 AUGUSTA, MAINE  
 04333-0035  
 TEL: (207)624-8521  
 FAX: (207) 624-8637

JOHN ELIAS BALDACCI  
 GOVERNOR

ANNE L. HEAD  
 DIRECTOR



**AUTHORIZATION OF CREDIT CARD PAYMENT**

**Fees owed to this Department may be paid by the use of a credit card. If you wish to pay your fee(s) with your credit card, please complete this form and send it with your application. Payment through credit cards will not be processed without this authorization form.**

|   |  |                  |
|---|--|------------------|
| <b>Name of applicant:</b><br>(fees being paid for)            |  |                  |
| <b>Mailing Address of applicant:</b><br>(fees being paid for) |  |                  |
| <b>City:</b>  | <b>State:</b>                            | <b>Zip Code:</b> |
| <b>County:</b>  | <b>Telephone #:</b> (____) _____ - _____ |                  |
| <b>Name of cardholder:</b><br>(if other than applicant)       |  |                  |
| <b>Mailing Address:</b><br>(if other than applicant)          |  |                  |
| <b>City:</b>  | <b>State:</b>                            | <b>Zip Code:</b> |

I authorize the State of Maine, Department of Professional and Financial Regulation, Office of Licensing and Registration to charge my:

Visa       MasterCard \_\_\_\_\_  
Card number

Expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_ in the amount of: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_