

## STATE OF MAINE DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION BOARD OF LICENSURE OF FORESTERS 35 STATE HOUSE STATION AUGUSTA, MAINE 04333-0035

Janet T, Mills
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.

Name of applicant: (fees being paid for)			
Mailing Address of application (fees being paid for)	nt:		V
City:	State:		Zip Code:
County:		Telephone #: ()_	
Name of cardholder: (if other than applicant)			
Mailing Address: (if other than applicant)			
City:	State:		Zip Code:
I authorize the State of Maine Occupational Regulation to c		essional and Financial	Regulation, Office of Professional an
] Visa [ ] MasterCard		Expiration date:/	
in the amount of: \$		[ ] I understand	that fees are non-refundable.
Signature:		Dat	te:/

(207)624-8521 (OFFICE PHONE)

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FAX: (207)624-8637