

Jan Martin Equine Management
P.O. Box 475
Buellton, CA 93427
(805)331-4087

AUTHORIZATION FOR CREDIT CARD USE

Client: _____ Client Account Number _____

Amount to be Charged today \$ _____ Charge statement balance monthly yes or no

_____ Visa _____ MasterCard _____ American Express _____ Discover

Card Holder Name _____

Credit Card Number _____

Expiration Date _____ Security Code _____

Credit Card Billing Address _____

I authorize Jan Martin Equine Management to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement. I understand there will be a 3% charge.

Cardholder Signature _____ Date _____

Print Name _____

Please return this form to jmequinemanagement@hotmail.com or by fax to (805)693-0535 or to PO Box 475, Buellton, CA 93427

BANK WIRING INFORMATION

Swift Code: USBKUS44IMT
Routing Number: 122235821
Account Number: 1-582-0417-7279

US Bank
2010 Mission Drive
Solvang, CA 93463
USA
1-805-691-3214

ZELLE

805-331-4087 or jmequinemanagement@hotmail.com

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