

FCAAIA - CREDIT CARD ON FILE

All credit card info is stored and locked securely at all times and will remain strictly confidential.

- You will **NOT** receive monthly statements from us in the mail.
- Cards will be charged for outstanding balances at the end of each month.
- As a courtesy we will call you beforehand for balances greater than \$1000.
 - Best phone number to reach you _____

Patient(s) Name _____

Patient(s) Date of Birth _____

PRIMARY CARD (HSA, FSA, etc.)

Credit Card # _____

Name on Card _____

Exp. Date _____ CVV _____ Signature _____

BACKUP CARD (if primary card declines or runs out)

Credit Card # _____

Name on Card _____

Exp. Date _____ CVV _____ Signature _____

Internal Use Only

Rec'd: _____ House#: _____ Zip: _____ Ins: _____

Guarantor Number(s) _____

_____ Total Amount Charged \$ _____

MR#s _____