

**Town of Dickinson Court
531 Old Front Street
Binghamton, NY 13901**

Hon. Annette Slocum
Hon. Gregory A. Gates

Telephone 607- 723-9403

CREDIT CARD AUTHORIZATION

Please PRINT clearly and submit this entire form for processing at the address shown above.

Defendant Name _____

Case Number/Ticket Number _____

Credit Card: Visa ___ Discover ___ Mastercard ___ Exp. Date _____

Credit Card Number _____

3 Digit Verification Code (on back of card) _____

Total Amount Due \$ _____ **PARTIAL PAYMENTS ARE NOT ACCEPTED**

Card Holder _____
(clearly print name as it appears on card)

I hereby accept the fine amount(s) imposed by the court and authorize payment thereof on the above-noted credit card. Note: Should the bank reject your transaction, or your failure to submit all required information will result in a default judgment being issued without further notice.

(Signature as it appears on card) ******

****If cardholder is other than the defendant, submit a clear copy of signature ID.
(Example: driver license, etc.)**