



**Multilist Service of Springfield REALTORS®
Automatic Credit Card Billing Authorization Form**

Customer Name: _____

Agent ID number: _____

E-mail Address: _____

Cell Phone: _____ - _____ - _____

Credit Card Information:

Cardholder's Name: _____

Cardholder's Billing Zip Code: _____

Credit card number: _____ - _____ - _____ - _____

Expiration date: ____ / ____

Begin date: _____

Please check all that apply: MLS \$45 _____ Unlicensed Assistant \$25 _____

Payments will be drawn on the 11th of each month.

Please send the completed form to accounting@gsbor.com

Return of this form is authorization to pay all past due MLS Fees.

Annual GSBOR dues will NOT be deducted automatically.

Signature

Print Name

Date

By signing this form, I agree to the automatic monthly charge to my credit card for MLS service that is provided to me by the Greater Springfield Board of REALTORS® and Multilist Service of Springfield REALTORS® through the National Association of REALTORS® e-Commerce system. This form is for monthly MLS.



**Greater Springfield
Board of REALTORS®, Inc.**
www.gsbor.com