

Credit Card Authorization Form

Douglas County Treasurer

2601 West 6th Street, Lawrence, KS, USA 66049



For use in Douglas County, KS

Cardholder Information

Name

Billing Street Address

City

State

Zip

Email Address

Phone Number

Driver's License Number

Signature

I hereby affirm that I am the owner of the below reference credit card and that my name is listed on the front of the credit card. I hereby authorize Douglas County Treasurer's office to charge my credit card (listed below) in the amount of \$
for payment of transactions processed.

Account Holder Signature

Credit Card Information

Credit Card Type

MasterCard

Visa

American Express

Discover Card

Card Number

Expiration Date

CVV

Cardholder Signature

Cardholder Signature Date

There will be an additional 2.35% processing fee applied to the total of the transaction. Contact 785-832-5273 for questions.

Questions? E-mail us at motorvehicles@dgcoks.gov or call us at (785) 832-5273.