



## One-Time Credit Card Authorization Form

I hereby authorize BackgroundChecksInBulk/Background Screeners of America to make a one-time charge to my credit card below, and if necessary, initiate adjustments for any transactions credited/debited in error.

**Credit Card Number**

**Expiration Date**

**Security Code**

**Name on Card**

Billing Address on Card: \_\_\_\_\_

X \_\_\_\_\_  
Authorizing Individual Signature

Date: \_\_\_\_\_