



Iowa Board  
of Certification

## Credit Card Payment Authorization

**Check one:**  Visa  MasterCard  Other \_\_\_\_\_

Name \_\_\_\_\_

Card # \_\_\_\_\_

Billing \_\_\_\_\_  
Address \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_

IBC Fees: \$ \_\_\_\_\_

\*Processing Fee: \$ 5.00

Amount to Charge \$ \_\_\_\_\_ (Total of IBC Fees and Processing Fee)

\*Credit Card processing fee

Signature \_\_\_\_\_ Date \_\_\_\_\_

*In case I owe more or less than the amount shown above, I give IBC permission to charge my credit card the total amount owed and understand that IBC will contact me via email or phone to confirm this amount.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*Note:** Please carefully check the amount owed – every credit card charge will be assessed a \$5.00 fee, regardless of the amount of charge. Fees are clearly indicated for all services/products; you are welcome to call the IBC office at 515-965-5509 if you have questions regarding specific fees.