

**SALVADOR (SONNY) BARRERA III
KLEBERG COUNTY CLERK**

**P.O. BOX 1327
KINGSVILLE, TEXAS 78364-1327
361-595-8548 (OFFICE)
361-593-1355 (FAX)**

CREDIT CARD AUTHORIZATION

Credit Card: **MasterCard** **Visa** **Discover**

Credit Card Number: _____

Expiration Date: ____ / ____

Name on Card: _____

Address card billed to: _____

Work Phone: _____

Home Phone: _____

I _____ hereby authorize the Kleberg County Clerk's
Office to process the above credit card for full payment of services rendered in the
amount of _____ and an additional processing fee of _____.

Date: ____ / ____ / ____

Cardholder's Signature: _____

***\$3.00 Transaction Fee per every \$100.00 paid* (Ex. \$23.00 Fee will be \$26.00 Total)**

****3% Transaction Fee if over \$500.00****