

**St. Johns County Clerk of Courts
Credit/Debit Card Phone Authorization Slip**

To pay with Visa, Master Card, or American Express, this form must be completed and returned to St. Johns County Clerk of Courts.

Item to be paid for (i.e. case #, ticket #, copies): _____

Defendant's Name/Address:

Cardholder's Name/Address (if different from defendant):

Telephone No: _____

I hereby authorize the St. Johns County Clerk of Courts to charge my credit/debit card:

Card No: _____

Expiration Date: _____ V-code _____*

Dollar amount authorized \$ _____ (cardholder must complete)

A convenience fee of 3.5% will be added to your authorized amount in accordance with the Clerk's merchant services contract.

Card Holder Signature: _____

Date: _____

*V-code is the 3-digit number on the back of the card or 4-digit on the front of the American Express card.

Fax to: **Recording** 904-827-5649 **Family/Civil** 904-819-3662
 Criminal 904-819-3666 **Probate** 904-819-3677
Board Minutes & Records 904-819-3664

Mail to: **St. Johns County Clerk of Courts**
4010 Lewis Speedway
St. Augustine, FL 32084

