

**CREDIT CARD AUTHORIZATION Fiscal Year 2014-2015**

\*\*\*\*\* ***Please complete and return a new form for each fiscal year*** \*\*\*\*\*

**Mail form to:** Concept In Time I.O.A. **OR** **Fax form to:** 760-321-0164  
67590 Jones Road **OR** **E-mail to:** manager@villamykonos.com  
Cathedral City, CA 92234-6401

**CHECK ONE**

Annual Assessment of \$999.00 Invoiced: 7/1/14 Due: 7/16/14  
**OR**

Semi-annual assessments of \$509.00  
Invoiced: 7/1/14 Due: 7/16/14, Invoiced: 1/1/15 Due: 1/16/15  
**OR**

Quarterly assessments of \$260.25  
Invoiced: 7/1/14 Due: 7/16/14, Invoiced: 10/1/14 Due: 10/16/14,  
Invoiced: 1/1/15 Due: 1/16/15, Invoiced: 4/1/15 Due: 4/16/15  
**OR**

Monthly assessment of \$94.40 Invoiced Monthly on the 1<sup>st</sup> Due on the 16<sup>th</sup>.

**AND**  All other payments including prior assessment balances

**Card #1**  MasterCard  Visa  Discover

**Card #:** \_\_\_\_\_ Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Card Billing Address:** Street No. \_\_\_\_\_ Zip Code \_\_\_\_\_ \*Verification Code # \_\_\_\_\_  
(\* the last 3 digits of the number on the back of the card in the area where you signed it)

Your Interval # is shown on any Invoice. You need to indicate it if you own more than one Interval.

**Amount to be paid using Card #1 for the Intervals noted below.**

Interval #: \_\_\_\_\_ Amount to be paid using Card #1 on the above dates: \$ \_\_\_\_\_

Interval #: \_\_\_\_\_ Amount to be paid using Card #1 on the above dates: \$ \_\_\_\_\_

Interval #: \_\_\_\_\_ Amount to be paid using Card #1 on the above dates: \$ \_\_\_\_\_

\_\_\_\_\_  
**Printed name** **Signature** **Date**

***Complete the following only if you are using 2 credit cards***

**Card #2**  MasterCard  Visa  Discover

**Card #:** \_\_\_\_\_ Expires: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Card Billing Address:** Street No. \_\_\_\_\_ Zip Code \_\_\_\_\_ \*Verification Code # \_\_\_\_\_  
(\* the last 3 digits of the number on the back of the card in the area where you signed it)

Your Interval # is shown on any Invoice. You need to indicate it if you own more than one Interval.

**Amount to be paid using Card #2 for the Intervals noted below.**

Interval #: \_\_\_\_\_ Amount to be paid using Card #1 on the above dates: \$ \_\_\_\_\_

Interval #: \_\_\_\_\_ Amount to be paid using Card #1 on the above dates: \$ \_\_\_\_\_

Interval #: \_\_\_\_\_ Amount to be paid using Card #1 on the above dates: \$ \_\_\_\_\_

\_\_\_\_\_  
**Printed name** **Signature** **Date**