



Bulk Manual Credit Card Payment Authorization Form

Instructions: To pay by credit card, please complete both sections below.

CREDIT CARD HOLDER INFORMATION

Please check credit card type:

- Visa
 MasterCard
 Discover
 American Express

Credit card number: _____ Expiration date : _____/_____(mm/yy)

Exact name as it appears on the credit card: _____

Billing Zip Code: _____ Total Amount to be charged: \$ _____

Primary phone number: _____ Secondary phone number: _____

Cardholder Signature: _____ Date: _____(mm/dd/yy)

ORDER INFORMATION

Manual Requested:

- | | | |
|--|----------------------|------------------|
| <input type="checkbox"/> 2019 Commercial Driver's Manual | Boxes Ordered: _____ | Amount: \$ _____ |
| <input type="checkbox"/> 2019 Driver's Manual | Boxes Ordered: _____ | Amount: \$ _____ |
| <input type="checkbox"/> 2019 Motorcycle Operator's Manual | Boxes Ordered: _____ | Amount: \$ _____ |
| <input type="checkbox"/> 2019 Parent/Teen Driving Guide | Boxes Ordered: _____ | Amount: \$ _____ |

Please send this credit/debit card payment form and a bulk order manual request on school or company letterhead to:

Georgia Department of Driver Services
ATTN: Public Information Office
2206 East View Parkway
Conyers, GA 30013