



KEEPING AMERICA'S DREAM AFFORDABLE

PAYMENT FORM

Please print or type the following information.

PAYMENT METHOD:

(Make Checks payable to Tennessee Housing Association or THA)

CHECK MONEY ORDER

CHARGE MY CREDIT CARD:

American Express MasterCard VISA Amount \$ _____

Card Holders Name: _____

Card Number: _____ CVV#: _____ Exp. Date: _____

Signature: _____

By signing this authorization form we will charge your credit card the amount shown above or on your billing statement.

Please Note: (Please type or write clearly).

COMPANY _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE _____ **FAX** _____ **E-MAIL** _____

Please mail forms, with check or money order to the following address:

THA * P.O. Box 569 * Mt. Juliet, TN 37121 or Fax to (615)255-8869.
Faxes must be accompanied with credit card number and authorization.