

Credit and Debit Payments

Payment Information
Name as it Appears on Card:
Billing Address for Card:
Email Address for Receipt:
Card Type: Visa MasterCard
Phone Number:
Card Number:
Card Expiration Date:
Card Security Code: (located on the back of the card)
Authorization
One Time Payment
Payment Amount: \$
Recurring Payment
Recurring Amount: \$
Total Loan Amount: \$
Payment Date: 1 st of the Month 15 th of the Month Other:
All recurring payments will be processed on the 1 st or 15 th of the month. If the 1 st or 15 th of the month falls on a Saturday or Sunday payment will be processed on the following Monday. Recurring payments will continue till loan is paid in full.
Name (print): Sign:
Date:
Please fax this page to (443) 817-4923 or email to help@apartmentangel.org Apartment Angel Inc. PO Box 1017 – Middletown, MD 21769
www.apartmentangel.org