



MUNICIPAL COURT
4000 GALLERIA PARKWAY
BEE CAVE, TX 78738

CREDIT CARD AUTHORIZATION FORM
EMAIL: COURT@BEECAVETEXAS.GOV

STATE OF TEXAS

DATE: _____
MM/DD/YYYY

VS.

(LAST, FIRST, MIDDLE)

CITATION(S) _____

Total Balance: _____

Offense(s): _____

Date of Offense: _____

CREDIT CARD INFORMATION

Payment Amount: \$ _____ Card type (select one) VISA MASTER CARD

NAME AS IT APPEARS ON CARD: _____

CARD BILLING ADDRESS: _____

CARD # _____

EXPIRATION DATE: _____

PAYMENT AUTHORIZATION:

I _____,
(LAST, FIRST, MIDDLE)

the undersigned do hereby authorize the City of Bee Cave Municipal court to charge my credit card account in the above numbered cause for the above referenced offense charged in the Municipal Court of the City of Bee Cave, Travis County, Texas. However, if any portion of the fine and costs is paid after the 31st day after the date of judgment, the defendant shall pay an additional \$15.00 as required pursuant to SEC. 51.921, Government Code.

By entering the above plea and authorized credit card information I understand as the card member, acknowledge receipt of goods and / or services in the amount of the total shown heron and agree to perform the obligations set forth by the card member's agreement with the issuer.

Card holder's Signature

MM/DD/YYYY

Defendant's Signature

MM/DD/YYYY

YOU CAN SCAN AND EMAIL OR MAIL THIS FORM TO THE BEE CAVE MUNICIPAL COURT AT THE ABOVE LISTED ADDRESS IN ORDER TO GET PROPER CREDIT FOR YOUR CASE. FOR FASTER SERVICE YOU MAY FAX OR EMAIL. THE COURT DOES NOT ACCEPT DISCOVER OR APPLE PAY AS FORMS OF PAYMENT METHODS.