

CREDIT/DEBIT CARD FEE DISCLOSURE STATEMENT

By signing on the line below, I agree and acknowledge that I will be charged a fee for utilizing the credit/debit card machine using my Visa, Mastercard and/or Discover Credit/Debit Card. I also acknowledge that this fee is solely to reimburse Local 230 for the cost they will incur as a result of providing this service to me.

The fee to be charged is \$2.50. This fee will be added to the charge amount, at the time that the charge is made. I also agree that this fee will be charged every time I utilize my credit/debit card to make a payment.

I further understand that any refund(s) due to me will be mailed by Local 230, via check, seven (7) working days from the date of said transaction and that I will not be reimbursed the \$2.50 service fee.

Print Name: _____

Signature: _____

Date: _____