



CREDIT CARD PAYMENT

MAILING ADDRESS
Horizon Trust Company
P.O. Box 30007
Albuquerque, New Mexico 87190

FOR OVERNIGHT NIGHT MAIL ONLY:
Horizon Trust Company
6301 Indian School Rd. NE, Suite 614
Albuquerque, NM 87110

P: 888-205-6036 • F: 505-288-3905 • Operations@Horizontrust.com

CREDIT CARD INFORMATION

Charge Credit Card

I have read and understand the Self-Directed IRA Account Agreement regarding the credit card charge and I authorize the credit card payment by Horizon Trust Company for fees to establish the IRA account

Card Type Master Card Visa Discover American Express

Name on Card: _____

Card Number: _____

Billing Address For Card: _____

Expiration Date: _____

City/State/Zip: _____

Card Security Code (CSC): _____

I authorize Horizon Trust Company to initiate fees pursuant to the current Horizon Trust Company Fee Schedule for the below listed account numbers.

Account #: _____

Account #: _____

Account #: _____

Account #: _____

Account #: _____

Account #: _____

Signature of Card Holder : _____

Signature of Account Owner: _____