



CITY OF GRAND RAPIDS

PHONE: (616) 456-3020

EMAIL: grtreasurer@grcity.us

GRAND RAPIDS CITY TREASURER CREDIT CARD PAYMENT ADVICE

Date: _____ Please print the information requested below and return to the Treasurer's Office by fax # or email.
Thank you for your generosity!

Name: _____ **Flood Relief** Amount: \$ _____

Address: _____

Address for Bill: _____
(if applicable)

City, State,
Zip Code: _____

Phone Number: _____
(From 8:00 a.m. - 5:00 p.m.)

Email address: _____

We will email you a receipt for tax purposes. **Thank you!**
If you do not have an email address, we will mail you the receipt.

Method of Payment

Visa

Master Card

Discover/Novus

Card Number _____

Expiration Date _____

My signature below authorizes the Grand Rapids City Treasurer's Office to charge my account.

Customer Signature _____

Please fax this advice to (616) 456-3413 or (616) 456-4414 or email it to grtreasurer@grcity.us

OR MAIL TO: CITY TREASURER'S OFFICE
300 MONROE AVE NW RM 220
GRAND RAPIDS, MI 49503-2296