

DEBIT CARD AUTHORIZATION FORM

Debit Card Info	ormation:	
Card Type:	□ MasterCard	□ Visa
Cardholder Nan	ne (as shown on card): _	
Customer Name	e (if different from the ca	rd):
Card Number: _		
Expiration Date	(MM/YYYY):	Security Code:
Billing Informa	tion:	
Billing Street Ac	ldress:	
City, State, and	Zip Code:	
Billing Phone: _		
	that I am the owner of th nt of the debit card.	e referenced debit card and that my name is
debit card for ag	greed upon payments. I unsactions and that I am	DBA National Nation Loans (NNL) to charge my understand that my information will be saved to required to inform NNL of any changes to my
Signature		 Date

*If the card is being provided by a third-party (not the NNL customer), then the cardholder must also provide a clear copy of the front and back of a current government-issued ID. If the card is being provided by an NNL customer, this is not required.

WLCC Lending DBA National Nation Loans
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