**CREDIT CARD BILLING AUTHORIZATION FORM**

Name Appearing on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Credit Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Verification Value 3 or 4 Digit Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cardholder Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorization Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby authorize Ronald L. Bell & Associates, P.C., for legal services rendered, to place the charges indicated below on my credit card as an e-mail/facsimile transaction:

**3% Charge Card Fees 8 % AMEX Fees**

|  |  |  |
| --- | --- | --- |
| $100.00 | $ 3.00 | $ 8.00 |
| $1000.00 | $ 30.00 | $ 80.00 |
| $2000.00 | $ 60.00 | $160.00 |
| $3000.00 | $ 90.00 | $240.00 |
| $6000.00 | $180.00 | $480.00 |

You are hereby authorized to charge my credit card in the amount of: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

plus an additional transaction fee of : $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for a total of: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

***IT IS UNDERSTOOD THAT ALL CHARGES TO THIS CREDIT CARD***

***ARE IRREVOCABLE AND NONREFUNDABLE.***