



## Credit Card Payment Authorization Form

**Instructions:** To pay legal fees by credit card, please complete both sections below.

### Credit Card Holder Information

Please check credit card type:

Visa       MasterCard       American Express       Discover

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_/\_\_/\_\_

Exact name as it appears on the credit card: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_ Amount to be charged: \$ \_\_\_\_\_

Primary Phone Number: (\_\_\_\_) \_\_\_\_\_

Secondary Phone Number (\_\_\_\_) \_\_\_\_\_

I, \_\_\_\_\_ hereby authorize Ratloff Law Firm, LLC. to charge the credit account number listed above for the total cost of all fee's and products delivered by the firm. By providing this authorization, you hereby authorize Ratloff Law Firm to bill your credit card information for all such costs incurred pursuant to the services the firm has provided to you the client.

Cardholder's Signature: \_\_\_\_\_

Date: \_\_/\_\_/\_\_