

**Bauer &  
Associates**  
ATTORNEYS AT LAW

**CREDIT CARD AUTHORIZATION**

The undersigned card holder authorizes Bauer & Associates Attorneys at Law, P.A. to make the following charge:

AMOUNT OF PAYMENT \$ \_\_\_\_\_

TYPE OF CREDIT CARD (Circle One)

**VISA    MASTERCARD  
DISCOVER    AMEX**

CARD NUMBER \_\_\_\_\_

CVV \_\_\_\_\_ (3-4 Digit Security Code – back of card)

EXPIRATION DATE: \_\_\_\_/\_\_\_\_

The billing information for this credit card is:

Card Holder: \_\_\_\_\_ Phone # \_\_\_\_\_

Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

NAME OF BAUER & ASSOCIATES' CLIENT IF DIFFERENT THAN  
CARD HOLDER: \_\_\_\_\_

***I understand that this information will be used solely for purposes of verification with the credit card issuer/processors to prevent fraudulent usage. United States Code, Title 18, Part I, Chapter 63.***

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

\_\_\_\_\_  
**Signature of Card Holder**