AUTHORIZATION TO BILL CREDIT CARD

CIRCLE ONE: VISA MASTERCARD AMERICAN EXPRESS DISCOVER

PRINT NAME OF CARDHOLDER:_____

CREDIT CARD NUMBER:_____

SECURITY CODE (THREE DIGIT NUMBER ON BACK OF CARD):_____

EXPIRATION DATE:_____

ADDRESS *AND ZIP CODE* WHERE CREDIT CARD BILLS ARE RECEIVED:

ADDRESS:_____

ZIP CODE:_____

I am the card-holder of the above-referenced credit card and hereby authorize J. Shawn Hunter, P.A., to bill my credit card for attorney's fees and/or costs in the amount of $_____.

Cardholder acknowledges receipt of goods and/or services in the amount of the total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the issuer.

SIGN HERE >>>>>>>>>>>>>>>>>>>>_____

Signature of Cardholder **Date**

For office use only:

AP #: _____

GBOK:_____