

LEWIS REED & ALLEN P.C.
Attorneys

CREDIT/DEBIT CARD AUTHORIZATION FORM

I authorize Lewis Reed & Allen P.C. to automatically charge my card, listed below, on a periodic basis, stated below, for the legal services and costs provided for me. My right to use this service is subject to any limits established by my card issuer. It is my responsibility to update the card information that is used to pay for this service. I understand that I may terminate this authorization agreement at any time by written request to Lewis Reed & Allen P.C.

Lewis Reed & Allen P.C. reserves the right to charge this card, as directed below by the cardholder, without requiring the cardholder's signed authorization for each transaction. Also, Lewis Reed & Allen P.C. reserves the right to terminate this authorization agreement at any time.

Card Information

Cardholder Name: _____

Card Number: _____

Expiration Date: _____ **CVV Code:** _____

Billing Address: _____

Email: _____ **Phone Number:** _____

Client Information

LRA File Number: _____

Client Name (if different than cardholder): _____

I authorize Lewis Reed & Allen P.C. to automatically charge my card for (select one of the following):

_____ **The full amount of my invoice every month**

_____ **A fixed amount of \$ _____ every month on the _____ day of the month**

_____ **A one-time charge of \$ _____**

****I understand and agree that I will also be charged a **3% service fee** for all credit card transactions.****

Signature: _____ **Date:** _____