

JON R. PARSONS LAW FIRM

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Credit Card Payment Authorization Form

I, _____ (printed name)

agree to pay \$_____ using my credit card listed below for legal services provided by Jon R. Parsons Law Firm.

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Expiration Date: ___ / ___ / ___ Verification Number: _____ *

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Billing Address: _____

I agree that Jon R. Parsons Law Firm may charge my account on the next billing statement for all costs and expenses actually incurred by the firm for my use of a credit card to make payments. Charges may include costs imposed by the credit card company and by banks through which payment is made or processed.

Signature

Date

* The Verification Number is the 3 digit number found on the back of your Visa and MasterCard card near the signature line, and the 4 digit number found on the upper right quadrant of the front of your American Express card.