

Corporate Address: 1500 W El Camino Avenue #510 Sacramento, CA 95833

Phone: 855-5VALPRO | Fax: 866-900-4665

Tax ID: 81-5199068

Credit Card Information & Authorization

Credit Card Type:	Case #:		
Card #:			
Name on card:			
Expiration:	CVV2 (3-4 digits):		
Address where CC Statement is sent: City: Zip:	State:	Most Credit Cards 1 Signature 14123412341234 567 Card Code	American Express 7997 9500b Card Code
Email Address Associated with Card:			
Phone number:			_
Sign:	Date:		

I authorize Valpro Attorney Services, LLC to charge the credit card indicated on this form. The card is NOT present. I also understand that should there be any issues with the credit/Debit card being used/charged, I will be responsible for any and all expenses incurred. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company.

^{**} Please note: a 10% credit card processing fee will be applied to all orders paid with a credit or debit card **