



ASAP Evictions -The Law Office of GUERRA & SEYEDI

TEL: (562)997-9690 * ADDRESS: 235 E Broadway Long Beach, CA 90802 * Email: info@asapevictions.com

CREDIT CARD AUTHORIZATION FORM

Name as shown on Card: _____

Card Type: Visa MasterCard American Express Discover

Account Number: _____

Expiration Date (Month/Year): _____ Security Code (CVV): _____

Billing Address: _____

City, State, Zip Code: _____

Phone Number: _____

Case Name/Property Address: _____

Amount to be charged \$ _____ plus 3.5% credit card processing and handling fee of \$ _____

Total \$ _____

Description of Charges _____

[] Authorize card to be used for additional approved charges pertaining to this case/matter INITIALS _____

By signing below, I authorize ASAP Evictions -The Law Office of GUERRA & SEYEDI, to charge my credit card the amount(s) listed above.

Date: _____

Client Signature

Please return completed form by email to info@asapevictions.com