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|  | **Coastal Healing & Counseling Services****2122 S. El Camino Real #203****Oceanside, CA 92054****(760) 407-2840** |  |
| creditcard_form_05 |
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| 3 digit security code (4 digit for AMEX)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip code of billing address for credit card: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Would you like email confirmation of charges? **Yes No**  If yes, please provide email address: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

I authorize the use of this card as payment for services provided by Coastal Counseling:

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Signature Date