GEHRKE & ASSOCIATES, S.C.

INTELLECTUAL PROPERTY ATTORNEYS AND ADVISORS

CREDIT CARD AUTHORIZATION FORM

CLIENT NAME:		
Cardholder Name:	Signature:	
Address:		-
	DISCOVER AMERICAN EXPRESS	.:
your information is being used to	ot accept debit card payments. Please prov pay government fees directly.	ride credit card information only if
Credit Card Number:		
Expiration Date:/		
Billing Zip Code:		
Card Identification Number:		
(3 digits located on the back for m	ost or 4 digits printed on the front for Am	erican Express)
VISA VISA		
Amount: \$(U	VSD) plus an additional 3.5% of the total to	o cover credit card processing fees.
Special Instructions:		

Send the authorization to:

Gehrke & Associates, SC 123 North 86th Street Wauwatosa, WI 53226 accounting@gehrke-law.com