

CLARK COUNTY PROCESS SERVICE LLC d/b/a CCPS lv 720 E. Charleston Blvd. Suite 135 Las Vegas, Nevada 89104 Office 702.387.0151 Fax 702-387-7834 CCPSlv.com

> New Serves: service@ccpslv.com Email Contact: office@ccpslv.com

Credit Card Authorization Form

- RETURN COMPLETED FORM BY FAX 702-387-7834
- BY EMAIL OFFICE@CCPSLV.COM

Clark County Process Service LLC, dba CCPS Iv is authorized to charge your card for the amount of the charges incurred to complete the Order(s) submitted, as described in either your letter of instruction or other means, including this authorization.

On this date(s)/	<	>Invoice Number	
For Ongoing Charges 🔷 O			
Cardholders Name:			
Business Name:			
Address Associated:			
Telephone:		⁼ ах:	
Email Address:			
Check one: \diamondsuit VISA \diamondsuit	MASTERCARD	$\diamondsuit_{ extit{DISCOVER}} \diamondsuit$	> _{AMEX}
Card #:			
3 or 4 Digit #: _ Bil	lling Zip Code: _	Exp. Dat	te:
I certify that I am the holder of the above credit card, or have CCPSIv, and I agree to all of the terms and conditions.	been authorized by the holder, to use	e it to pay for services provided by Clark	County Process Service LLC, d/b/a
Signature:		Date: _ / /	
This Authorization form is required for new clients a card. For clients outside Nevada, all orders will be a guarantee of payment. Clark County Process within 30 days. Because most of these transactio CCPS Iv. keep a physical credit card on file in or IS NON-REFUNDABLE, NON-REVOCABLE, AND I	charged to your card, unless p Service LLC, d/b/a CCPS I ons are performed electronically der for the charge to the card to	repaid by check. Once credit has v reserves the right to charge you , it is not required that Clark Cou b be valid. I UNDERSTAND THE C	been established, this authorization is ir card for past due balances not paid unty Process Service LLC, d/b/a CHARGE FOR THE ABOVE SERVICE

Clark County Process Service LLC, d/b/a CCPS Iv reserves the right to restrict the credit of any client for any reason.