

The Law Office of Scot S. Fagerland PC

CA SBN 230,997 | USPTO # 56,532

CREDIT CARD AUTHORIZATION FORM

Name on credit card:

Name of client if different from name on card:

Credit card number:

Expiration date:

Security code:

Billing address:

Phone #:

Email address:

Signatures if returning by hand:

(Client):

(Attorney):

Date received:

If this form is returned by email, successful delivery will constitute electronic signature by both parties.

No deposit is provided or required. By completing, signing, and returning this form, Client authorizes The Law Office of Scot S. Fagerland, PC (Attorney) to charge billable hours on a weekly basis. Attorney will provide a statement for each charge.

The hourly rate is \$150 / hr as of 1/01/19 and is subject to increases in the future.

Correspondence between Client and Attorney (emails, phone calls, meetings) is billed by the ¼ hr, with the exceptions of:

1. Contract negotiations for services estimated to exceed \$1,000
2. One free ¼ hr per week of substantive correspondence.

2931 S. Sepulveda Blvd. Suite I
Los Angeles, CA, 90064

www.FagerlandLaw.com
(310) 478-6146
info@FagerlandLaw.com