## **Credit Card Authorization Form**

Name (as it appears on card):	
Credit Card Number:	
Expiration Date:	
CVV Code:	
Zip Code (associated with billing):	
Signature:	
This farm with size Andrew Louis LOOM to make any outbook and about a far	
This form authorizes Audrey Lewis, LCSW to make pre-authorized charges for Billing may occur after actual service date.	r psycnotnerapy services.
DATE OF AUTHORIZATION:	