



Law Offices of  
**Bret Jones P.A.**  
 ATTORNEYS AND COUNSELORS

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 Clermont, Florida 34711  
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**Credit Card Payment Authorization Form**

Sign and complete this form to authorize Bret Jones, P.A. to make a debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date.

**Please complete the information below:**

I \_\_\_\_\_ authorize Bret Jones, P.A. to charge my credit card  
 (full name)

account indicated below for \_\_\_\_\_ on or after \_\_\_\_\_. This payment is for  
 (amount) (date)

\_\_\_\_\_  
 (description of goods/services)

Billing Address \_\_\_\_\_

Phone# \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

Account Type: <input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> AMEX	<input type="checkbox"/> Discover
Cardholder Name _____			
Account Number _____			
Expiration Date _____			
CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____			

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**One Time Use:**

I authorize Bret Jones, P.A. to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

**Recurring Billing:**

I authorize Bret Jones, P.A. to charge the indicated credit card on a periodic basis for the amount due under my retainer contract with Bret Jones, P.A. as indicated above. This Recurring Payment Authorization/Periodic Charge shall remain in force until cancelled by me in writing. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

**Third Party:**

I authorize Bret Jones, P.A. to charge the indicated card upon my approval for third party vendor costs arising out of or related to my matter. Cost may include but are not limited to court reporter fees, expert fees, shipping costs, etc. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds with the terms indicated in this form.