

THE BALAGUERA LAW FIRM, P.A.

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CREDIT CARD AUTHORIZATION FORM FOR TRAFFIC REPRESENTATION ONLY

Name of Cardholder: _____

Telephone Number: _____

Full address Credit Card Statement goes to:

Nature of Charged Services: TRAFFIC CITATION DEFENSE

Total Fee: Please call our office for a price:

Note: please remit to our office at least two days prior to the deadline, otherwise add additional \$23.00 for clearance fee.

Credit Card Type:

Visa MasterCard American Express Discover

Account Number: _____

I, _____, DO HEREBY AUTHORIZE WILL BE AUTOMATICALLY CHARGED TO MY CARD AS NOTED ABOVE. I UNDERSTAND PAYMENT IS FOR A NON-REFUNDABLE FLAT FEE REPRESENTATION. I ALSO UNDERSTAND THAT COURT COSTS, AND OTHER FINES ARE PAYABLE DIRECTLY TO THE CLERK OF THE COURTS AND NOT INCLUDED IN THE PRICE OF THIS REPRESENTATION.

Client Signature: _____

Date: _____

- Please attach a photocopy of : your citation(s), driver’s license and credit card. This form can be sent to our office via fax, mail or email. Please call to ensure this form was received by our office. We are not responsible for items that are not delivered to our office.