

Insurance Group of Nevada Corp PO Box 270910 Las Vegas, NV 89127 702-996-6434 702-608-8566

info@nevadainsurancegroup.com

Client Credit Card Authorization

In an effort to better serve our clients and simplify your billing experience, our firm offers credit card acceptance. Charge card information is filed with your confidential client information and kept secure.

OPTIONS	(initial) I hereby authorize Insurance Group of Nevada to charge the balance currently due on my account for \$ (initial) I hereby authorize Insurance Group of Nevada to charge the balance of my account automatically each month. Card will be charged the FIRST of each month for prior month fees. (initial) I choose to manually pay my account balance. Balance for legal services is due on the FIRST of each month. After the 15th of the month, balances are considered past due and will be charged a \$25 late fee. After 30 days, account balances will automatically be charged to the card on file.					
PAYMENT INFORMATION	Client Name: Client Billing Address:					
	Type of Card: Card Number: Expiration Date: Security Code: (last three digits on card, last four on AMEX) The undersigned guarantees performance of the financial provisions of this agreement. Card Holder Name: Signature of Card Holder: Date:					
CHARGE POLICY	(initial) Being the authorized cardholder or the Corporate Officer, by signing above I underst and agree to the terms set forth in this agreement, agree to pay, and specifically authorize to chemy credit card for the services provided. I further agree that in the event my credit card beconvalid, I will provide a new valid credit card upon request, to be charged for the payment of outstanding balances owed. I furthermore confirm that I have received all services and good satisfactory conditions. (initial) Charges made for actual services performed by our office are non-refundable. In event of pre-payment any unused funds will be refunded within 30 days.					