

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF LOUISIANA**

**CREDIT CARD COLLECTION AUTHORIZATION FORM**

We hereby authorize the United States Bankruptcy Court for the Eastern District of Louisiana to charge the following bank card numbers(s) for payment of filing fees and other court related expenses.

**Name as it appears on Card:** \_\_\_\_\_

**Name of Law Firm:** \_\_\_\_\_

**Authorized users:** \_\_\_\_\_  
Signature \_\_\_\_\_ Print/Type \_\_\_\_\_  
Signature \_\_\_\_\_ Print/Type \_\_\_\_\_

**Credit Card Billing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Telephone No.:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Telephone No.:** \_\_\_\_\_

**Master Card No.:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Visa Card No.:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Discover Card No.:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**American Express No.:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

**Diners Card No.:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_

Contact person and telephone number, in the event that further information is required, e.g. verification of runner/courier's authority to charge to the above account:

**Name:** \_\_\_\_\_ **Telephone number:** \_\_\_\_\_

This form will be kept on file in the clerk's office, and shall remain in effect until specifically revoked in writing. It is the responsibility of the firm/company named herein to provide written notification to the Clerk's Office if a card has been canceled or revoked. An updated Credit Card Collection Authorization Form must be filed when modification of the above information is necessary, including the expiration date when a card is renewed.

Indicate if this information is: **NEW** [ ] or **UPDATED** [ ]

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*In the event that a charge against this account is denied, you will be notified immediately to make payment in cash, money order or certified check. This payment will be due immediately. Any abuse of this privilege will result in your removal from the credit program. All forms must contain original signatures.

**Return completed form to the Financial Department, Attn. Mrs. Betty Smith, U.S. Bankruptcy Court, EDLA, 501 Magazine Street, New Orleans, LA 70130.**