



**Longwell Gentle**  
Attorneys Who Know How To Help You

189 South Orange Avenue, Suite 900-S  
Orlando, Florida 32801-2346  
Phone: (407) 426-5757 Fax: (407) 426-5755

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**CREDIT CARD AUTHORIZATION**

I, \_\_\_\_\_, whose billing address and zip code  
are \_\_\_\_\_  
authorize Longwell & Gentle, P.A. to charge to my \_\_\_\_\_ credit card  
number \_\_\_\_\_, expiration \_\_\_\_\_,  
verification code (3 digit code on the back of the card) \_\_\_\_\_, for  
\_\_\_\_\_.

\_\_\_\_\_  
Print name as it appears on card

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

Address to send receipt to: \_\_\_\_\_

Contact phone #: \_\_\_\_\_

Please complete and send to:  
Billing@LongwellGentle.com or by facsimile 407-426-5755.