



United States Bankruptcy Court

Eastern District of Missouri

www.moeb.uscourts.gov

(314) 244-4500

CREDIT/DEBIT CARD AUTHORIZATION FORM

I hereby authorize the U.S. Bankruptcy Court for the Eastern District of Missouri to charge the card listed below for payment of fees, costs, and expenses which are incurred by the authorized users. I certify that I am authorized to sign this form on behalf of my law firm and/or that I am the person authorized to use this credit card. I understand that this information will be securely maintained in the Court's safe. I also understand that when a pleading requiring a fee is received without the fee, the Court will automatically charge the account number listed on the form.

[ ] New Applicant [ ] Renewal Applicant [ ] Replaces Current Card On File

If you choose to complete this form by hand, please print legibly and use only blue or black ballpoint ink.

Cardholder name as it appears on the card: \_\_\_\_\_

Card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_ Date: \_\_\_\_\_

Type: [ ] American Express [ ] Diners Club International [ ] Discover Card [ ] Mastercard [ ] Visa

Names of individuals authorized to use account number listed above for payment of fees, costs and expenses:

(Include cardholder name, if authorized user)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Law Firm Name: \_\_\_\_\_

(If sole practitioner, type in your name)

Address: \_\_\_\_\_

Immediate Contact Number: \_\_\_\_\_ Alternate Contact Number: \_\_\_\_\_

This form will remain in effect until the expiration date is met or specifically revoked in writing. It is the cardholders' responsibility to submit a new form and notify the court of: (1) any changes to the registered attorney, (2) a new expiration date when a credit card has been renewed, or (3) a card has been revoked, canceled, or stolen.

In the event the charge against the account is denied, you will be notified immediately to make payment in cash, money order or certified check. Any abuse of this privilege may result in your removal from the credit card program.

Submit this form, with a photocopy of the front and back of the credit card, to:

Dana LaRosa  
U.S. Bankruptcy Court  
Thomas F. Eagleton Courthouse  
111 S. Tenth St., 4th Floor  
St. Louis, MO 63102

FOR COURT USE ONLY  
Recv'd \_\_\_\_\_ Entered By \_\_\_\_\_ Date Entered \_\_\_\_\_

