THIS FORM MUST BE TYPED, FILLED OUT COMPLETELY WITH ORIGINAL SIGNATURE(s) AND SUBMITTED WITH THE PLEADING(S) AT THE TIME OF FILING. The signature field must be signed by the person whose signature appears on the back of the credit card. A photocopy of both sides of the credit card MUST accompany this form. Photo identification will be requested from persons designated as authorized users.

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF NEW YORK

CREDIT CARD - ONE TIME/MAIL AUTHORIZATION FORM

Credit Cardholder Name: _____

Card Type: ❒ MasterCard ❒ Visa ❒ Discover ❒ American Express ❒ DinersClub

Account No.: _____ ***AmEx ID#***: _____ ***Exp.Date***: _____

Billing Address: _____ ***E-mail address:*** _____

_____

_____ ***Phone #***: _____

I authorize the following person to use the above card for services as checked below:

Name: _____ ***Signature:*** _____

Signature of CardHolder: _____

❒ **Copy of credit card (both sides) attached**

CHARGE INFORMATION:

❒ Filing Fee (new case) ❒ Motion Fee ❒ Conversion Fee ❒ Search Fee

❒ Copies ❒ Certification ❒ Appeal ❒ Complaint

❒ File Retrieval from Archives ❒ Other

Fees for the above pleadings will be charged in accordance with the current Bankruptcy Court Miscellaneous Fee Schedule.

All original authorizations forms will be stored in a secure location in the Buffalo office.