

KIMBRIEL LAW FIRM  
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Southlake, Texas 76092

To pay your bill with VISA or Mastercard, please provide the following information:

\_\_\_\_\_ VISA

\_\_\_\_\_ Mastercard

Name as it appears on the card \_\_\_\_\_

Account No. \_\_\_\_\_

Expiration date \_\_\_\_\_

CVC Indicator (last three numbers on the signature slot on back of card) \_\_\_\_\_

Zip Code of Billing Address: \_\_\_\_\_

Amount to be charged \$ \_\_\_\_\_

Your signature \_\_\_\_\_