

**CREDIT AUTHORIZATION**

**KATHY WAGNER COUNSELING SERVICES, LLC**

111 Petrol Point Drive, Suite 102  
Peachtree City, GA 30269

I \_\_\_\_\_, authorize KATHY WAGNER COUNSELING  
(Print name)  
SERVICES, LLC to charge my credit card for services rendered.

CREDIT CARD # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

CARD CV2 # \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME ON CARD \_\_\_\_\_  
(As it appears on card)

RECIEPT DELIVERY \_\_\_\_\_  
(Email)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Special Instructions/Notes: