Shaw Strannahan, M.A., MFTI Supervised by Julie Wells, M.S. Licensed Marriage, Family Therapist #79760 7545 Irvine Center Drive, Suite 200 Irvine, Ca 92618

Credit Card Authorization

I,, authorize Shaw Strannahan to charge my cred card for retainer purposes and any unpaid balances and fees associated with my Psychotherap			
=	paid at the time services a of the charge will be mail	re rendered will automatically be charge ed to me.	ed to my
Name as it appears on card		Type of Card	
Card Number			
3 or 4 digit code	Expiration Date	Phone Number	
Billing Address for S	tatement Ci	ty, State, Zip	
Signature			;

Credit card processing fees will be included as follows: \$4 for \$100-149 fee, \$8 for \$150-249 fee.