

BEVERLY HILLS BAR ASSOCIATION
MANDATORY FEE ARBITRATION PROGRAM
CREDIT CARD CHARGE FORM

Petitioner's Name: _____

Respondent's Name: _____

Type of Card: VISA_____ MasterCard_____ American Express_____

Card Number: _____

Expiration Date: _____

I authorize payment of the BHBA filing fee to my credit card in the amount of \$_____

Print Name: _____

Date: _____ Signature: _____

Return this form with your Request for Arbitration of a Fee Dispute only if you are charging your filing fee.

Beverly Hills Bar Association
Mandatory Fee Arbitration Program
300 South Beverly Drive, Suite 201
Beverly Hills, CA 90212-4805
phone: 310-601-2442 fax: 310-601-2441