



Orange County Bar Association
P.O. Box 6130
Newport Beach, CA 92658

Filing Fee Credit Card Charge Form

Petitioner's Name: _____

Respondent's Name: _____

Type of Card: Visa Mastercard American Express

Card Number: _____ CVV: _____

Expiration Date: _____ Billing Zip Code: _____

I authorize payment of the Orange County Bar Association Mandatory Fee Arbitration
filing fee to be charged to my credit card listed above in the amount of \$ _____

Print Name: _____

Date: _____ Signature: _____

Important:

Please return this form with your Petition to Arbitrate a Fee Dispute if you are paying the filing fee by credit card. Please send only the original of this form and do not make copies of this form.