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Credit Card Payment Form - Please complete and email as authorisation of your payment




Payment Date - Insert date

Client Name: Insert details

Payment of: \$ 497.00

For the Stage 1 DIY Mediation Separation of Asset and Liability Schedule

Debit my:

	Card No.: <input type="text"/>
	Expiry Date: <input type="text"/> / <input type="text"/> Amount: \$ <input type="text"/>
	Name of Cardholder: <input type="text"/>
	Signature of Cardholder: <input type="text"/>

Payments by Amex will attract
a 3.12% surcharge

Direct Credit Details : BSB 063 162 ACC 10605332

Liability limited by a scheme approved under Professional Standards Legislation