# UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLORADO OFFICE OF THE CLERK Alfred A. Arraj United States Courthouse 901 19th Street, Room A105 Denver, Colorado 80294-3589 303-844-3433 / Fax: 303-335-2040

# **CREDIT CARD COLLECTION NETWORK**

The District of Colorado accepts Visa, MasterCard, American Express, Discover and Diners Club credit cards. A credit card may be used for various types of payments, including filing fees, copy work and criminal debt payments. It can be used for one transaction, or, upon submission of an authorization form as referenced below, may be used upon your request.

A law firm may complete a credit card "Authorization Form" (Attachment 1) which could be used for multiple transactions. The completed form would be sent to the Financial Department of the Clerk's office, who will maintain the credit card information in a secure place. Upon the filing of a new complaint, notice of removal, or other filing requiring a fee, and your authorization by e-mail to use the credit card, the Financial Department would process your payment. See our *Electronic Case Filing Procedures* (ECF) for further details. You may also authorize use of the credit card for other payments, such as payments for copies, certificates of good standing, etc.

Individual credit card payments may be made via the telephone, by mail or by e-mail. The amount of the payment, reason for the payment, your name as listed on the credit card, credit card billing address, credit card number, the V-CODE on the back of the card, expiration date and other miscellaneous information must be given to the deputy clerk.

For more information, contact the Financial Department at 303-335-2053.

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## CREDIT CARD COLLECTION NETWORK AUTHORIZATION FORM

(Name of Company/Firm)

hereby authorizes the United States District Court for the District of Colorado to charge the following bank credit card number for payment of filing fees and other court-related expenses.

# **Please Print Credit Card Information:**

Name	on Card:						
Billing	address:						
City _			State:	Zip Code	:		
Type o	of Card:		Card #:				
V-COI	DE (3 or	4 digit security of	code on front or b	back of card)	Exp. Date:		
E-mail Address:					Phone Number:		
in writi change	ing. It is in autho	the responsibility	y of the company new expiration da	/firm named h	l remain in effect until specifically revoked herein to notify the Clerk's Office of dit card has been renewed, or if a credit		
Approved by:					(Signature)		
					(Print Name)		
Date:							
			above, only thos		<b>ck only <u>ONE</u> box below)</b> are authorized to use this credit card (Use		
	Name:			Signa	ture:		
	Name:			Signa	ture:		
	• •	rson <b>filing on be</b> pay the fee.	half of the abov	e listed comp	any/firm, may authorize use of this credit		

Attachment 1