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1737 Sheridan Ave, Suite 226
P.O. Box 1735
Cody, WY 82414-1735
307-587-5059

LEGAL AUTHORIZATION

I/WE _____ do hereby authorize **Credit Service Company, Inc.** and/or its attorneys to represent our firm, as our agents, in any and all court actions to collect our funds on our behalf. **Credit Service Company, Inc.** shall be entitled to retain its usual fees plus the full amount of any court awarded damages and court costs that are collected. Suit shall be commenced in the name of **Credit Service Company, Inc.**

Dated this _____ day of _____, 20_____.

Merchants Name

By: _____ (Authorized Signature) _____ (Title)

This authorization will remain in effect from this date forward, until written notice or cancellation of the authorization has been received by **Credit Service Company, Inc.**

Merchant address
