

Dr Laura Lehmann, PLLC

26111 W 14 Mile Rd, Suite 108  
Franklin, MI 48025  
Phone: 248-270-2030  
E-Mail: [wellness@drLauraLehmann.com](mailto:wellness@drLauraLehmann.com)  
Web: [www.drLauraLehmann.com](http://www.drLauraLehmann.com)

# Credit Card Approval

Name:

Date:

Zip Code:

Credit Card Type (Please circle):

Visa

Mastercard

Credit Card Number:

Expiration Date:

Card Identification Number:

Amount to Charge: \$