

LIMITED POWER OF ATTORNEY

I hereby designate and appoint the holder of this Certificate as my true and lawful attorney-in-face for the limited purpose of entering a plea and securing appropriate legal representation of my interest concerning Citation No. _____

My attorney-in-fact is to exercise his/her best professional judgement in rendering this assistance, and I understand and agree to be responsible for payment of any fines and/or court costs assessed by the court. In addition, I hereby give authorization to TVC Pro-Driver, Inc. to perform a CSA/DATAQ Challenge on my behalf for this matter, if applicable.

If necessary, I would be willing to (check all that apply):

- Attend trial (a future court date)
- Allow attorney to enter into a plea agreement (negotiate for a reduction, amendment or dismissal of charge)
- Attend defensive driving school. If yes, have you been to defensive driving school in past 18 months? **Y or N**
If yes, when and where? _____

A fax or photocopy of this power of attorney is just as binding as the original when in the possession of an assigned agent or attorney.

Name _____

Address _____

SS# _____

Signature _____

Date _____

Telephone # (_____) _____

Dispatch # (_____) _____

Driver's License State/No. _____

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HANDLING FEE CARD

Must Accompany Payment

Handling Fees Per Citation (See your membership handbook or call **800-288-2889** to determine the applicable handling fee.)

- NO Handling Fee \$125 Handling Fee
 \$25 Handling Fee \$295 Pre-Existing**
 \$50 Handling Fee \$395 Pre-Existing**
 \$110 Handling Fee 25% Discount

*Assuming the citation would otherwise be covered. This excludes matters which are covered under the 25% discount.

**Pre-Existing fees are \$295 per citation provided that the citation is received in the Home Office more than 10 business days prior to the court date. If the citation is received in the Home Office 5 or less business days prior to the court date, the fee is \$395; however, we cannot guarantee that an attorney can be retained on such short notice. If this is the case, we will refund the pre-fee.

IMPORTANT NOTICE:

Rendering of services is dependent upon three key factors:

1. Fee and copy of citation received in our office within 10 business days from date citation is issued.
2. Valid and accepted credit card or bank draft charge.
3. Information required on reverse.

Membership Number _____

Enrollment Date on Membership Card _____

Name As it Appears on CC/Bank Account _____

Signature _____

HANDLING FEE OF \$ _____ PAYABLE BY:

Cashier's Check/Money Order payable to TVC PRO-DRIVER, INC.

Credit Card (Circle One): MC VISA DISC AMEX

Credit Card # _____ Exp. Date _____

Electronic Funds Transfer:

EFT Institution Name _____

EFT Phone (_____) _____

Routing # (9 Digits) _____ Account # _____

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