

**Marilyn Luber, Ph.D.**

Medical Tower Building  
255 S. 17<sup>th</sup> Street, Suite 804

Philadelphia, PA 19103

Telephone: 215-545-8296 • Fax: 215-545-7245

**PAYMENT PREFERENCE FORM**

Client Name: \_\_\_\_\_

***Please Check One Options:***

- Yes, I intend to pay for services by check at each session.
- Yes, I intend to pay for services by cash at each session.
- Yes, I intend to pay for services by Venmo at each session.
- Yes, I would like to make another arrangement at each session.

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Signature \_\_\_\_\_

Date \_\_\_\_\_