

## **Credit/Debit Card Authorization form**

(Autorizacion para tarjeta de credito o debito)

\*\*\*\*\*\* PLEASE FILL IN EVERY LINE \*\*\*\*\*\*\*\*\*\*

## WE CANNOT ACCEPT CREDIT CARDS - DEBIT CARDS IN THE NAME OF THE DECEASED

I hereby authorize Florida Cremation Services, LLC DBA Vallés Funeral Homes & Crematory to
charge my credit card/debit in the amount of: \$ Date/
Deceased name:
✓ Credit Card/Debit Type:
✓ Credit Card Number:
Expiration Date:/ Security Code:
✓ Name as it Appears On Card:
✓ Billing Address:
✓ City/State/Zip Code:
✓ Phone number:
✓ Card Holder Signature Authorizing Charge As Indicated Above
Signature Date

Please be advise that I will not dispute these charges at any time.

There will be a non-refundable convenience fee of 4% over the total amount paid.