



**Cifuentes - Marrero P.A.**

www.cifuentesmarrero.com

Main Office:  
4300 Biscayne Boulevard, Suite 204  
Miami, FL 33137-3211  
Ph: 305 573 7418  
Fax: 305 573 7433

1580 Sawgrass Corporate Parkway, Suite 130  
Sunrise FL 33323  
Ph: 954 343 7062

### CREDIT CART AUTHORIZATION

DATE: \_\_\_\_\_

**NAME (as it appears on your credit card)**

Last Name	First Name	Second Name

#### Address in the USA

Street Address	City	State	Zip Code
Telephone	Fax	E-mail	

#### Billing Address of the credit if different from the above

Street Address	City	State	Country
Telephone	Fax		

#### Credit Card Information

Credit Card Number	Security Code	Visa	MC	Amex	Discover
		\$			
Day	Month				
EXPIRATION DATE			Amount to be charge in U.S. dollars		

I hereby authorized CIFUENTES-MARRERO, P.A. to charge my credit card identified above the following amount \$ \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Teléfono (305) 573-7418 Fax (305) 573-7433  
E-mail: [mcifuentes@cifuentesmarrero.com](mailto:mcifuentes@cifuentesmarrero.com)