

City of McAllen  
Vital Statistics Division  
Credit Card Charge Authorization Form

I, \_\_\_\_\_, the Card Holder of (please check one):

Visa       Master Card       Discover

hereby authorize the City of McAllen to charge the amount of \$ \_\_\_\_\_ + **the \$3.00**

**service charge\***, representing the initial payment for the following (please check one):

Birth Certificate       Death Certificate       Burial Transit Permit

**I have read this entire agreement and understand that I will be held fully responsible for the \$3.00 (\*per \$100 being charged) service charge within the terms of the agreement.**

Card Holder's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: (        ) \_\_\_\_\_

\_\_\_\_\_  
Signature of Card Holder

\_\_\_\_\_  
Date

(Note: The Card Holder's name and address listed above should be the same information the Credit Card Company has for the Card Holder.)

**Once completed, please fax to the City of McAllen, Vital Statistics Division (956) 681-1194 along with the application and copy of photo identification of applicant. If the card holder is someone other than the applicant, please fax copy of card holder's identification as well.**

**NOTE: When a request is being made by fax, the requested documents will be mailed back to the applicant regular mail through the U.S. Postal Service. No exceptions.**

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Credit Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_

**Please be advised that the Credit Card # will be cut off and shredded once it has been processed.**