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# MIAMI Payment Authorization Form

Print Name: \_\_\_\_\_

License: \_\_\_\_\_

I authorize the MIAMI Association of REALTORS® (*Statement will show Realtor Association Chicago*) to charge the below credit/debit card in the amount of \$ \_\_\_\_\_. I certify that I am the card holder or have permission from the cardholder to charge this expense.

I understand should the charges be disputed by the credit card company there will an assessment of \$30 per transaction that cannot be written off. MLS services can and may be suspended and payment in full is required to re-establish services.

Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Name on Card: \_\_\_\_\_

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

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_