

# CREDIT CARD AUTHORIZATION

El Heraldo de Broward, Inc.

Tax ID: 59 2013604

PO Box 70785, Oakland Park, FL 33307

**for the**

25th Annual *Hispanic Women of Distinction* Charity Awards Luncheon and Business Expo

Friday, August 21, 2026 11:00am to 2:00 pm at the



1 Seminole Way, Hollywood, FL 33314

I, (your name) \_\_\_\_\_ hereby authorize

El Heraldo de Broward, Inc. to charge my credit card for the amount listed below:

Cardholders Name: \_\_\_\_\_

Type of Card :  American Express  Master Card  Visa  Other

Credit Card Number : \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Amount \$ \_\_\_\_\_

Security Code : \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Card holders Address : \_\_\_\_\_ Zip \_\_\_\_\_

Email for confirmation of credit card : \_\_\_\_\_

**Please send this to: hispanicwomenlunch@aol.com**