FUNERAL CONVERGENCE

FLORIDA FUNERAL ESTABLISHMENT ORDER FORM

Market Share Reports | Total by Funeral Establishment

1 Select County

Check every county to include.

- ☐ Alachua
- ☐ Baker
- ☐ Bay
- ☐ Bradford
- ☐ Brevard
- ☐ Broward
- ☐ Calhoun
- ☐ Charlotte
- ☐ Citrus
- ☐ Clay
- ☐ Collier
- ☐ Columbia
- ☐ DeSoto
- ☐ Dixie
- ☐ Duval
- ☐ Escambia
- ☐ Flagler
- ☐ Franklin
- ☐ Gadsden
- ☐ Gilchrist
- ☐ Glades
- ☐ Gulf
- ☐ Hamilton
- ☐ Hardee
- ☐ Hendry
- ☐ Hernando
- ☐ Highlands
- ☐ Hillsborough
- ☐ Holmes
- ☐ Indian River
- ☐ Jackson
- ☐ Jefferson
- ☐ Lafayette
- ☐ Lake
- ☐ Lee
- ☐ Leon
- ☐ Levy
- ☐ Liberty
- ☐ Madison
- ☐ Manatee
- ☐ Marion
- ☐ Martin
- ☐ Miami-Dade
- ☐ Monroe
- ☐ Nassau
- ☐ Okaloosa
- ☐ Okeechobee
- ☐ Orange
- ☐ Osceola
- ☐ Palm Beach
- ☐ Pasco
- ☐ Pinellas
- ☐ Polk
- ☐ Putnam
- ☐ Santa Rosa
- ☐ Sarasota
- ☐ Seminole
- ☐ St. Johns
- ☐ St. Lucie
- ☐ Sumter
- ☐ Suwannee
- ☐ Taylor
- ☐ Union
- ☐ Volusia
- ☐ Wakulla
- ☐ Walton
- ☐ Washington

Total County Selected: _____

2 Choose report period

2025 is the most current annual report. Pricing is per county.

	Report option	Starting period	County	Rate	Extended total
☐	**Quarterly subscription**	Quarter: Q1 Q2 Q3 Q4	_____	**$175**	$ _____
☐	**2025 annual report**	Full year	_____	**$550**	$ _____
☐	**2024 annual report**	Full year	_____	**$550**	$ _____
☐	**2023 annual report**	Full year	_____	**$550**	$ _____
☐	**Prior-year annual report**	Year: _____	_____	**$550**	$ _____

ORDER TOTAL: $ _____

Quarterly selections renew automatically until canceled. All reports are delivered by email.

3 Purchaser and credit card information

Purchaser / organization: _____ Attention: _____

Mailing address: _____ City / State / ZIP: _____

Email: _____ Telephone: _____

Card type: ☐ **VISA** ☐ **MasterCard** ☐ **American Express** ☐ **Discover**

Name of cardholder: _____ Cardholder telephone: _____

Card number: _____ Expiration date: _____

Security code: _____ (3-digit or 4-digit AMEX) Billing address: _____

Authorized signature: _____ **Date:** _____

Order total: $ _____

Submit: **Info@FuneralConvergence.com** **Fax:** (858) 367-7734 **Mail:** P.O. Box 1489, Palm Springs, CA 92263-1489