

Steve Sisolak
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
Division of Public and Behavioral Health
Helping people. It's who we are and what we do.



Lisa Sherych
Administrator

Ihsan Azzam, Ph.D., M.D.
Chief Medical Officer

Authorization for Credit Card Use

Card Information			
Select One: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover			
Credit Card Number	Expiration Date	CVV Security Code	
Billing Address (Street Address)	City	State	ZIP

PLEASE NOTE: The name must match the person requesting information from the Office of Vital Records. The Office of Vital Records will not retain this information and it will be destroyed.

Cardholder Information		
Cardholder Name and billing address as it appears on the card.		
First Name	Middle Name	Last Name
Cardholder's Phone Number		

Customer's Authorization	
Customer's Signature	Date

(Revised 12/01/2020)

