

ADVANCED CENTER FOR PLASTIC SURGERY

Credit Card HIPAA Release

The Advanced Center for Plastic Surgery requires a signed release statement from you, for your credit card that you are using to pay for your procedure. The reason for this is that we may need to provide information to **THAT** card company if there is a dispute with them regarding your transaction.

I understand that **NO** information will be released unless there is a dispute with your credit card company.

Signature: _____

Date: _____

Amount: _____

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