



Indian River Media Group
308 Avenue A
Fort Pierce, FL 34950
772.466.3346

TO: _____ FROM: _____

Credit Card Authorization Form

I authorize Indian River Magazine Inc. to charge my credit card:

METHOD OF PAYMENT Visa___ MasterCard___ *American Express___

In the amount of \$_____ ***per insertion for the length of the signed contract***

3-digit security code (back of card, right of signature) _____

4-digit security code on front of American Express _____

Credit Card Number Month/Year of Expiration

Signature_____

We cannot process your payment without signature or expiration date

****Billing Address**** (Indicate address where statements are received)

Name

Company Name

Address Suite/Dept

City State Zip

Phone Email Address

Email: lauren@indianrivermag.com or FAX: 866.505.2446