



MAGAZINE PUBLISHERS  
TRADE SHOW PRODUCERS

**National Business Media, Inc.**

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# CREDIT CARD PAYMENT AUTHORIZATION

Date: \_\_\_\_\_

Customer: \_\_\_\_\_

Sales Rep: \_\_\_\_\_ Account #: \_\_\_\_\_

Invoice #: \_\_\_\_\_ Invoice Date: \_\_\_\_\_

Issue: \_\_\_\_\_ Magazine/Show: \_\_\_\_\_

Card Type: MasterCard  Visa  American Express

**PAYMENT FOR:**

Advertising: \$ \_\_\_\_\_ Booth: \$ \_\_\_\_\_ Training: \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Cardholder Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cardholder Email Address: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

**PLEASE SIGN AND DATE BELOW.**

**FAX TO (303) 404-1550 Attn: Accounting Department  
or email to: Accounting.Department@NBM.com**

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETAIN A COPY FOR YOUR RECORDS**

*Thank You!*