PREMIER FL MAGAZINE CREDIT CARD PAYMENT AUTHORIZATION
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PLEASE FILL OUT ALL HIGHLIGHTED AREAS BELOW AND RETURN VIA EMAIL TO <a href="mailto:PremierFLMagazine@Gmail.com">PremierFLMagazine@Gmail.com</a>

I,(Cardholder), authorize
Synergy SBG [Premier FL Magazine/ Flip'nHot Deals] to charge my credit card for
\$ This payment is for advertising in the Premier FL Magazine and/orFlip'nHot Deals for months.
BILLING INFORMATION
Billing Address: City, State, ZIP:
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CREDIT CARD INFORMATION
Card Type □: Mastercard   □ VISA   □ Discover   □ AMEX
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I (the Cardholder) understand that this authorization will remain in effect until I cancel it in writing, and I agree to notifySynergy SBG, LLC in writing of any changes in my account information or termination of this authorization at least <b>fifteen (15) days</b> prior to the next billing date. If the above noted payment date fall on a weekend or holiday, I understand that the payments may be executed on the next business day acknowledge that the origination of Credit Card transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this Credit Card and will not dispute these scheduled transactions; so long as the transactions correspond to the terms indicated in this authorizatio form.
Cardholder Signature: Date:
Printed Name:  You authorize regularly scheduled charges to your credit card. You will be charged the amount indicated above to your Credit Card each billing period beginning on the first of each month. A receipt for each payment will be provided to you and the charge will appear on your Credit Card statement. You agree that you may cancel by notifying Synergy SBG, LLC in writing of termination of this authorization at least fifteen (15) days prior to the next billing cycle.  Check Here if you prefer payment processing to be the 15th of each month.



