

GATEWAY GAZETTE

Bringing the Good of Your Community to You!
Since 2004

GATEWAY GAZETTE
GRASSROOTS

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GRAPHICS

WWW.GATEWAYGAZETTE.CA

Credit Card Pre-authorization

Dated: _____, in the Province of Alberta

I, _____
Name (printed)

Company Name

hereby give written consent to the Gateway Gazette to process credit card transactions (including purchases or returns) via verbal authorization over the telephone.

All debits and credits are to be applied to : _____
Credit Card Number Visa Mastercard

Expiry Date 3 digit verification
from back of card

in the event of a problem arising during processing, I can be reached at: _____

Automatically process for any ads I book

Call before processing for any ads I book

Signature of card holder

Mailing Address of Card Holder (must match mailing address for credit card statement)

Phone number connected to credit card

PLEASE RETURN THIS FORM VIA FAX TO: 1-888-516-5677