



Millry Communications

Automatic Monthly Credit Card Payment Authorization

VISA

Master Card

Card # _____ PIN _____

Expiration Date: Month _____ Year _____

Signature: _____

AUTHORIZATION

I authorize MILLRY COMMUNICATIONS to automatically charge my credit card for my bill each month on the bill due date. I may cancel this request by contacting MILLRY COMMUNICATIONS

Interoffice Use ONLY:

Subscribers Name: _____

Telephone Number: _____

Completed by: _____

Date Completed: _____

For confidentiality, this form will be filed in Automatic Credit Card Payment file in company safe.