

**Credit Card Authorization Form
(Advertising)**

The undersigned authorizes The Boston Globe to charge the credit card number below for advertising charges. If you are presently a Globe advertiser, please indicate your account number. If not, the payment will be posted to the advertising ordered this month.

Credit Department Fax: (617) 929-7664
Attn: Credit Card Administrator

Boston Globe Account Name:
Boston Globe Account Number (if applicable)

Card Type:
 American Express
 Visa
 MasterCard
 Discover

Name on Card:
Credit Card #:
Expiration Date:

Authorizing Signature: _____

Telephone: _____ Fax: _____

Amount: