

ProMedia LLC
 3518 W. Lake Center Drive, Suite D, Santa Ana, CA 92704
 Phone 714.444.2426
 Fax 714.444.2509



To avoid any delay in processing your order, please fill out completely and fax promptly to the attention of the CREDIT DEPARTMENT at (714) 444-2509 or mail to: 3518 West Lake Center Drive, Suite D, Santa Ana, CA 92704

Legal Name: _____ DBA/Assumed Name (if any): _____
 Billing Address: _____ Company Tax ID: _____
 City: _____ State: _____ Zip: _____ Phone: _____ Years in Business: _____
 Description of Business: _____
 Contact Person: _____ Sole Owner: _____ Partnership: _____ Corporation: _____

VALID CREDIT CARD INFORMATION

ProMedia's credit policy requires a valid credit card on file to extend 30-day credit terms for print advertising. You are authorizing us to recover funds from your credit card only once should your account become severely delinquent and nonpayable. (Circle One) Visa • Mastercard • Amex

Card #: _____ Exp. Date: _____
 Card Holder Name: _____ Card Holder Signature: _____

OFFICERS, PARTNERS, AND/OR PRINCIPALS

Name: _____ Name: _____
 Title: _____ Title: _____
 SS#: _____ SS#: _____

BANK REFERENCE

Name: _____ Address: _____
 Account #: _____ Type (Checking, Savings): _____
 Contact Person at Bank: _____ Phone: _____

MEDIA REFERENCES

Name: _____
 Address: _____
 Phone #: _____
 Account #: _____

Name: _____
 Address: _____
 Phone #: _____
 Account #: _____

BUSINESS REFERENCES

Name: _____
 Address: _____
 Phone #: _____
 Account #: _____

AD AGENCIES: If you are acting solely as agent for the advertiser, the advertiser must complete a credit application. A letter must also be included explaining who is responsible for payment and to whom billing should be sent.

Advertiser for Whom You Wish To Place Advertising: _____
 Address: _____ Phone #: _____

PROMEDIA LLC TERMS OF CREDIT ARE DUE UPON RECEIPT OF INVOICE

**** I certify that to the best of my knowledge and belief, the above credit information is correct. Furthermore, I authorize the release of credit information for the purpose of establishing credit with Promedia LLC.**

Signature of Principal or Officer: _____ Date: _____
 Signer's Name (Printed): _____