



CONTEST PAYMENT FORM

Complete this form and return



Mail: FPA Better Weekly Contest c/o Devon Dunkle
610 Crescent Executive Ct., Suite 112, Lake Mary, FL 32746-2111
Fax: 850-577-3611 **Email:** ddunkle@flpress.com

Payment must be received or postmarked by **Feb. 29, 2016**

Newspaper: _____ City: _____

Contact Person: _____

Phone: _____ FAX: _____

Email: _____

Number of ONLINE entries x \$10 = _____

Number of MAILED entries x \$15 = _____

Total =

Make checks payable to: Florida Press Association

IF PAYING BY CREDIT CARD, complete the following information:

_____ Mastercard _____ Visa _____ American Express _____ Discover

Card Number: _____ Exp. Date: _____

Security Code: _____

Billing Address: _____

Name on Card: _____

Authorized Signature: _____

Print Name of Signer: _____

Email for Receipt: _____