



MPIKC Website Advertising Form

Company Name: _____

Contact: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

Email Address: _____ URL: _____

Advertising Options

<p>Side Banner</p> <p><input type="checkbox"/> One Month - \$150</p> <p><input type="checkbox"/> Three Months - \$315 (Discount of 30%)</p>	<p>Bottom Banner</p> <p><input type="checkbox"/> One Month - \$200</p> <p><input type="checkbox"/> Three Months - \$420 (Discount of 30%)</p>
<p>Total Amount Due: \$ _____</p>	

PAYMENT AUTHORIZATION			
CREDIT CARD		CHECK	
CC NUMBER:		CHECK NUMBER:	
EXP DATE:	SECURITY CODE:	*Memo ~ MPIKC Website Advertisement	
Name as it appears on card:		Please make checks payable to MPICK, include payment with this form and mail to:	
Billing Address:		MPIKC, PO Box 24183, Overland Park, KS 66283	
SIGNATURE			
I authorize MPIKC to charge my credit card \$ _____			
Signature:		Date:	

Please submit all completed forms and artwork electronically to:
Mindi Johnson • mindisjohnson@gmail.com • 913.488.4059
 (Please send checks and a copy of this form to MPIKC at the address above)

Thank you very much for your support of MPIKC!!