# **Change in Credit Card Authorization for marketing products**

## Visa MasterCard American Express Discover

Account Number: Click or tap here to enter text.

Exp. Date: Click or tap here to enter text. CCV/Sec. Code: Click or tap here to enter text.

Name on Card: Click or tap here to enter text.

billing Street: Click or tap here to enter text.

Billing City, State Zip: Click or tap here to enter text.

I authorize Integrity Marketing Solutions to change my credit card/billing information on file and charge my account for monthly service FEES. I agree to pay a $35 charge for declined credit card drafts.

Signature: Click or tap here to enter text.

Date: Click or tap to enter a date.

## **Submit Securely:** [**https://kb.IMSRocks.com**](https://kb.IMSRocks.com/)

Warm Regards,

Integrity Marketing Solutions