



FLORIDA PRESS ASSOCIATION

Press Release Service Order Form

Complete and return via fax to Chris Dugan: (321) 283--5256 or email to: cdugan@flpress.com

Name: _____

Company: _____

Distribution Option – Please Circle All that Apply: Total Amount Due: \$_____

(Daily - \$75) (Weekly - \$100) (Daily & Weekly - \$135) (FL Capitol Press Corps- \$40)

OR

Target Market List (ONLY the specific Daily & Weekly Papers in the below market)

(Gainesville - \$50) (Jacksonville - \$45) (Miami -\$45) (Naples -\$50) (Orlando -\$70) (Panama City-\$20)
(Pensacola-\$30) (Tallahassee-\$50) (Tampa & St. Petersburg-\$75) (West Palm Beach-\$45)

Method of Payment:

Check # Enclosed _____ ****Checks should be made payable to Florida Press Service****

Indicate Card Type – Please Circle: Visa Mastercard American Express Discover

Credit Card Number: _____ Exp Date: _____

Security Code: _____

Name on Card: _____

Billing Address for Card: _____

Phone Number: _____

Email Address (for return receipt): _____

Signature: _____

For same day submission press releases & payment must be received by 2 p.m.

610 Crescent Executive Ct. Ste 112, Lake Mary, FL 32746