



LEAD RETRIEVAL PAYMENT FORM

Exhibit Company Name _____

Company Contact: _____

☐ **Lead Retrieval Software \$250**

Select payment option below.

☐ **ACH/wire transfer** ([Click here](#) for our ACH instructions)

☐ **Check** in the amount of \$_____. (check # _____)

☐ **Credit card payment** in the amount of \$_____

Charged to: ☐ American Express ☐ Visa ☐ MasterCard ☐ Discover

Account # _____ Security Code _____ Expiration

Date _____

Name on Card _____ Signature _____

Address _____

Email receipt to _____

**Our preferred payment method is through ACH/wire transfer. Credit card payments will be subject to a 2.5% processing fee.*

☐ **Send invoice to:**

Name _____

Company _____

Address _____

Email _____

Email this form to Cassandra Coleman (events@societycorpgov.org).

