



# Publisher Data On-Line Access Authorization Form

**Note: To be used for access to Edge, Encore and Publisher Portal/Return Flow Data**

I, \_\_\_\_\_, an authorized representative of the  
*(please print)*

company, \_\_\_\_\_,  
*(as it appears on the contract )*

hereby authorize the person listed below to have log on access to the above named company's on line EDGE data, as provided by CMG.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature (authorized) Date

<p><b>Check Access Required:</b>  <b>EDGE</b> <input type="checkbox"/>  <b>ENCORE</b> <input type="checkbox"/>  <b>PUBLISHER PORTAL/RETURN FLOWS</b> <input type="checkbox"/></p>
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Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

If Consultant, list Company Name: \_\_\_\_\_

If Consultant, list any other publishers for which you already have access: \_\_\_\_\_

Key Title (1) and Bipad: \_\_\_\_\_

Competitive Titles and Bipads: (5 Maximum)

_____	_____
_____	_____
_____	_____
_____	_____

Key Title (2) and Bipad: \_\_\_\_\_

Competitive Titles and Bipads: (5 Maximum)

_____	_____
_____	_____
_____	_____
_____	_____

Please include additional pages for more titles if necessary.

**Please fax completed form to Bruce Thompson at 609-524-1733.**