

PAYMENT FORM
Must be Included with all orders

E Z EXPO SERVICES
440 E. BONITA AVE. POMONA CA 91767
909-624-1697 FAX: 909-626-6589
email: julio@sprezrents.com

Company Name: _____ Booth # _____
Contact Name: _____
Address: _____
City/ State/ Zip: _____
Phone # _____ Fax # _____

- **This form must be completed and enclosed with all order forms and on file with E Z Expo Services prior to any service(s) being performed regardless if another form of payment is being used.**

- Cancellation Policies: Please note cancellation policies on the various forms.
- In order to receive DISCOUNT PRICING full payment **must** be included with order form! If paying by check; make payment in U.S. funds drawn on a U.S. bank. If paying by credit card; please fill out the enclosed authorization form.
- Customer is responsible for loss or damage to equipment.
- For your convenience, we will use this authorization to charge your credit card for any additional amounts incurred as a result of show site orders placed by you or your representative for this event.
- ALL ACCOUNTS MUST BE SETTLED AT OUR SERVICE DESK PRIOR TO THE OPENING OF SHOW.
- THERE WILL BE NO CREDITS ISSUED UPON COMPLETION OF SHOW.

Amount Enclosed \$ _____ Amount to be charged to Credit Card \$ _____

If paying by Check; please fill out the following information:

Check Number: _____ Drivers License Number: _____

Address _____

City _____ State _____ Zip Code _____

If paying by Credit Card; please provide the following information:

Credit Card Number: _____

Please Check: __ AMERICAN EXPRESS __ MASTERCARD __ VISA __ CVC Code _____

Expiration Date: _____ Name as it Appears on Card _____

Authorized By: _____ Cardholder's Signature: _____

Cardholders **Billing** Address _____ City _____ State _____ Zip Code _____