



CREDIT CARD AUTHORIZATION

2024 FAIR VENDOR

EMAIL TO: Tawana.Mobley@FloridaStateFair.com OR FAX TO: (813) 740-3505

CREDIT CARD:

FOR YOUR CONVENIENCE, WE WILL USE THIS AUTHORIZATION TO CHARGE ANY REMAINING BALANCE ON YOUR ACCOUNT PRIOR TO THE EVENT END. A COPY OF FINAL CHARGES WILL BE SENT TO THE EMAIL ADDRESS PROVIDED ON THIS FORM.

VISA

MASTER CARD

AMERICAN EXPRESS

TERMS

PLEASE COMPLETE ALL REQUESTED INFORMATION ON THIS FORM FOR PAYMENT OF BALANCE DUE. FOR YOUR CONVENIENCE, WE WILL USE THIS AUTHORIZATION TO CHARGE YOUR CREDIT CARD ACCOUNT FOR ANY ADDITIONAL AMOUNTS INCURRED AS A RESULT OF SHOW/SITE ORDERS PLACED BY YOUR REPRESENTATIVE. THE FAIR AUTHORITY HAS THE RIGHT TO CHARGE A 2.5% PROCESSING FEE.

EVENT:

2024 FLORIDA STATE FAIR

COMPANY:

CONTACT:

CELL PHONE:

ADDRESS:

CITY, STATE, ZIP:

EMAIL:

CHOOSE ONE:

ALL CHARGES:

AMOUNT:

AMOUNT CHARGED (FSFA USE ONLY):

TOTAL:

DATE:

PURPOSE:

BY SIGNING AND PLACING THIS ORDER, I ACCEPT ALL PAYMENT POLICIES AND THE TERMS AND CONDITIONS OUTLINED ON ALL FORMS COMPLETED.

SIGNATURE:

PRINTED NAME:

DATE:

CREDIT CARD:

EXPIRATION:

/

SECURITY CODE:

BILLING ADDRESS:

BILLING ADDRESS:

CITY, STATE, ZIP: