

**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](mailto: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 \_\_\_\_\_

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**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 \_\_\_\_\_