

METHOD OF PAYMENT FORM

NAME OF SHOW: _____
DATE OF SHOW: _____
COMPANY NAME: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
CONTACT: _____
PHONE: _____
EMAIL: _____



KENTUCKY INTERNATIONAL
CONVENTION CENTER

ATTN: Service Desk

221 Fourth Street, Louisville, KY 40202

PH: (502) 595-4367 FAX: (502) 583-1918

ONLINE ORDERS: www.kyconvention.org

WIRE TRANSFER

Wire info: 042 000314

Swift# FTBC US 3C

CHECK

To the address above in U.S. funds.

ACH TRANSFER

Kentucky State Fair Board

Fifth Third Bank

ABA# 083 002342

ACCT: 82194565

Receipts account

THIRD PARTY AUTHORIZATION

Please fill out Credit Card portion below.

Authorized Signature: _____

YOUR SIGNATURE ABOVE AUTHORIZES KEC TO CHARGE YOUR CREDIT CARD FOR ADVANCE ORDERS AS WELL AS ANY CHARGES INCURRED AS A RESULT OF ANY SHOW SITE ORDERS PERTAINING TO YOUR COMPANY; INCLUDING INTERNAL FREIGHT HANDLING (DRAYAGE).

VISA

AMEX

MASTERCARD

DISCOVER

DINERS

ACCOUNT NO: _____

CVV CODE: _____ (4 digits on front for AMEX)
(3 digit # on back of card)

EXP DATE: _____

Cardholder's Name: _____