

**PAYMENT INFORMATION FORM**

DEADLINE FOR RETURN OF FORM: July 11, 2022

P.O. Box 21245 - Louisville, KY 40221  
Ph. (502) 969-8588 - Fax (502) 968-4788  
email: andy@agxofky.com

**Payment Policy -**

Payment in full, including tax, must accompany order and be received by our office by deadline to qualify for discount rates. Please complete payment authorization form.

**Cancellation Policy -**

Cancellation after the deadline will be charged at 50% of prevailing rate. Cancellation after installation will be 100% of prevailing rate.

\*\*\*VALID REFUNDS WILL BE ISSUED AFTER CLOSE OF SHOW\*\*\*

**Late Request -**

Requests after deadline will be filled as available at the standard rates.

**Color/Size Selection-**

Choices not indicated will be selected by AG Exhibitions, INC to coordinate with the show colors and size of exhibit.

**\*\*\*THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR ORDER\*\*\***

**Services and Equipment Ordered**

\* NOTE: ONLY COMPLETE INFORMATION ASSOCIATED WITH ENCLOSED FORMS\*

- A) Furniture Rental Order Form \_\_\_\_\_ \$ \_\_\_\_\_
- B) Carpet Rental Order Form \_\_\_\_\_ \$ \_\_\_\_\_
- C) Chrome Grid Wall and Panel Board Order Form \_\_\_\_\_ \$ \_\_\_\_\_
- D) Hanging Sign Information \_\_\_\_\_ Non Taxable \$ \_\_\_\_\_
- E) Display Labor In Booth Forklift Service Order Form \_\_\_\_\_ Non Taxable \$ \_\_\_\_\_
- F) Special Furniture \_\_\_\_\_ \$ \_\_\_\_\_
- G) Freight \_\_\_\_\_ Non Taxable \$ \_\_\_\_\_

\*\*\*NOTE: ALL SALES/RENTALS ARE SUBJECT TO KENTUCKY SALES TAX\*\*\*  
IF EXEMPT FROM SALES/USE TAX WITHIN THE STATE OF KENTUCKY  
WE MUST HAVE A COPY OF YOUR CERTIFICATE OF EXEMPTION FORM  
FOR OUR FILES OR YOU MUST PAY APPLICABLE TAX.

Subtotal: \_\_\_\_\_  
6.00% State Sales Tax: \_\_\_\_\_  
Non-Taxable Total: \_\_\_\_\_

**TOTAL:** \_\_\_\_\_

**Payment By Check**

**PLEASE MAKE CHECK TO:  
A.G. Exhibitions**

**Please Complete The Following:**

Check Number \_\_\_\_\_ Dated \_\_\_\_\_ In Amount Of \$ \_\_\_\_\_

NOTE: All checks are deposited upon receipt. Do not post date. There is a \$35.00 for all checks returned by bank.

**Payment By Credit Card**

**Please complete ALL information. Note: All charges are processed thru our Louisville, Ky office.**

Card Member Name: \_\_\_\_\_

Card Type:  VISA  MASTERCARD  AMEX

Account Number:

Expiration Date:     Signature: \_\_\_\_\_

**NOTE: PLEASE INCLUDE THE ID NUMBER AS SHOWN ON THE BACK OF CARD**

# \_\_\_\_\_

\*\*\*NOTE: ORDERS RECEIVED WITHOUT PAYMENT, IN FULL (TAX INCLUDED) WILL NOT BE PROCESSED AND WILL NOT BE ENTITLED TO ADVANCE DISCOUNT RATE\*\*\*

Name of Event: 2022 NSRA Louisville, KY \_\_\_\_\_ Booth # \_\_\_\_\_ Firm Name: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Print/Type Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address (Street, City, State, Zip): \_\_\_\_\_

Date Received: \_\_\_\_\_ Invoice # \_\_\_\_\_ Check # \_\_\_\_\_ Amount: \_\_\_\_\_

**\*\*\*THIS FORM MUST BE COMPLETELY FILLED OUT AND RETURNED FOR YOUR ORDER TO BE PROCESSED\*\*\***

**\*\*\*PLEASE KEEP A COPY FOR YOUR RECORDS, AS WE DO NOT SEND CONFIRMATION OF ORDERS!\*\*\***