



METHOD OF PAYMENT FORM

Event Name: _____ Event Date(s): _____

Company Name: _____ Booth #: _____

Contact: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email (required): _____

WIRE TRANSFER

Wire info: 042 000314
Swift# FTBC US 3C

CHECK

Payable in US Funds to:
Kentucky State Fair Board
Remit to address below.

ACH TRANSFER

Kentucky State Fair Board
Fifth Third Bank
ABA# 083 002342
ACCT: 00082195031
Receipts Account

THIRD PARTY AUTHORIZATION

Credit card payments can be made online at
www.kyexpo.org/facilityServices.html

Authorized Signature: _____ Date: _____

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 on-site orders pertaining to your company; including internal freight handling (drayage).

PAYMENT INFORMATION

Payment forms with credit card information should NEVER be emailed or faxed to our facility.

VISA AMEX MASTERCARD DISCOVER DINERS

Account Number: _____

CVV Code*: _____ Expiration Date: _____

**3-digit number on the back of card or 4-digit number on the front of AMEX card.*

Cardholder's Name: _____

For information regarding services, please call **(502) 367-5321**.
For information regarding our payment procedures, please call **(502) 367-5227**.

Remit this form to the address below.

Kentucky State Fair Board | ATTN: FINANCE DEPT. | PO Box 37130 | Louisville, KY 40233