



Vendor Fair Payment Form

Company Information (please print):

We, _____ (company name), authorize Case Western Reserve University to charge my credit card (MasterCard, Visa, or Discover ONLY)

AMOUNT \$ _____ USD

CREDIT CARD TYPE _____

CREDIT CARD # _____

CARD CV2 # _____

(3-digit code on back of card)

EXPIRATION DATE _____

BILLING ADDRESS _____

BILLING ZIP CODE _____

NAME ON CARD _____

CONTACT NAME _____

SIGNATURE

DATE

For enhanced security reasons, we strongly encourage that you scan and e-mail your registration and credit card authorization to: vendorfair@case.edu.

If you would like, you can also fax to:

(216) 368-5088

ATTN: VENDOR FAIR

If paying by check, please make checks payable to:

Case Western Reserve University

Attn: Vendor Fair Team

10620 Cedar Avenue, room 205

Cleveland, OH 44106-4909