



Los Angeles Convention Center

CREDIT CARD PAYMENT AUTHORIZATION

Effective January 1, 2012

Payment for: **Space Rental** **Equipment**

Event Name: _____ Event ID # _____

License Issued to: _____

Licensed Period (including M/I & M/O) _____

Rental: \$ _____ Equipment/Services: \$ _____ **TOTAL AMOUNT: \$** _____

To be completed by Card Holder

Credit Card: American Express MasterCard VISA

AMOUNT PAID: \$ _____

Card No. _____ Expiration Date ____ / ____
Month /Year

Print Name
as it appears on Card _____

Authorized Signature
of Card Holder x Date _____

***PLEASE RETURN THIS FORM DIRECTLY TO THE FINANCIAL MANAGEMENT DIVISION
VIA FAX TO (213) 765-4380, OR BY REGULAR MAIL.***

***DO NOT SEND ELECTRONICALLY.
EMAIL MAY NOT BE SECURE.***

FOR LACC USE ONLY

Credit Card Transaction: Amount \$ _____ Date: _____

Authorization # _____ Date Entered: _____ Initial: _____