



Complete Sound, Lighting and Video Service
52 Forest Ave., Suite 6, 2nd Fl., Paramus, NJ 07652
P 201-340-2290; Fax 201-340-2108; C 201-954-3320
E-Mail: info@metromultimedia.com

PAYMENT AUTHORIZATION FORM

JA New York
July 15 - 17, 2018
Jacob K. Javits Convention Center

Company:	Booth:
Address:	
City, State Zip:	Phone:
Ordered by (Print):	
Email Address:	Fax:
ESTIMATED TOTALS	
Audio Equipment Total	
Projection Total	
Video and Data Display Total	
Labor Total	
<i>Sub Total Estimate due MetroMultimedia</i>	\$
<i>Sales Tax Due on Sub Total Amount</i>	\$
Delivery & Pick Up	\$ 150.00
<i>Total Due MetroMultimedia</i>	\$
PAYMENT AUTHORIZATION	

YOUR SIGNATURE OF THIS PAYMENT AUTHORIZATION FORM DENOTES ACCEPTANCE OF ALL TERMS & CONDITIONS INCLUDED ON THIS FORM AND ON YOUR ORDER FORMS

Company Check – Make payable to MetroMultiMedia, and reference JA New York. Mail to: 52 Forest Ave, Suite 6, 2nd Floor, Paramus, NJ 07652

****Please Note** – Returned checks are subject to a \$35.00 bounced check fee. **ALL CHECKS REQUIRE A CREDIT CARD BACK UP.**

Wire Transfers – If paying by wire transfer please contact MetroMultiMedia for wire transfer information and include a \$40.00 wire transfer fee.

ALL WIRE TRANSFERS REQUIRE A CREDIT CARD BACK UP.

Credit Card – For your convenience, MetroMultiMedia Services will use this authorization to charge your credit card account for your advance orders, not paid by check or wire, and any additional amounts incurred as a result of show site orders placed by you or your representative. These charges may include all MetroMultiMedia charges, and any charges that MetroMultiMedia may be obliged to pay on your behalf, including without limitations, any material handling and/or labor charges. Please Complete the information below.

<input type="checkbox"/> AMEX <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER															Exp. Date		
Account Number																	
Security Code					Visa/MasterCard/Discover (3 Digits), Amex (4 Digits)												

Cardholder Name (Please Print): _____

Cardholder Billing Address: _____

City/State/Zip: _____ Phone: _____

***The cardholder names above hereby authorize MetroMultiMedia to charge my credit card for the actual costs of the services estimated above and any additional services and amounts including, but not limited to, labor to install or remove equipment and/or material handling charges. If there is any intent to commit fraud, I will be held to the full extent of the law.

Cardholder Signature: _____ Date: _____

PAYMENT POLICY: MetroMultiMedia requires payment of estimated costs in full, including applicable taxes, at the time services are ordered. All services will be denied without complete payment. All adjustments to charges are to be made prior to completion of event. NO CREDITS WILL BE MADE AFTER THE CLOSE OF THE EVENT. Checks **must** be in US Dollars and drawn on a US Bank.

TAX EXEMPT STATUS: If you are exempt from paying sales tax, you must provide a certificate of exemption for the state in which services are to be provided, with your order.

EQUIPMENT: You are responsible for payment on any MetroMultiMedia rental equipment.

CANCELLATIONS – EQUIPMENT CANCELLATIONS NOT RECEIVED 48 HRS BEFORE DELIVERY DATE WILL BE CHARGED 100% - ** NO EXCEPTIONS **