



Huntington Place Detroit, MI May 9-11, 2023

## **PAYMENT POLICY**

Company Name:	Booth Number:	Booth Number:	
Address:			
City:	State:	ZIP:	
Print Name:			
Authorized Signature:			
E-Mail Address:	Phone:	Phone:	
Convention & Show Services, Inc. requires pre-payments fr installation. If you have not received a deposit schedule v CSS to obtain one. Orders for labor and services will not be I in whole unless prior arrangements have been requested a move-in. We require your complete credit card information	vithin 2 weeks of your scheduled inso nonored if the required deposit payn nd approved by CSS. Otherwise, th	tallation date, please contact nents are not made timely and is may result in a delay of your	
Exhibitors requesting third parties to pay their invoice must enclosed in this section. Payment for all labor and services the responsibility of the exhibitor.			
Final invoices will be completed approximately three weel days after receipt of invoice. Monthly finance charges of days or more.			
METHOD OF PAYMENT: Please indicate your preferred meth	od of payment:		
COMPANY CHECK  Please make checks payable to Convention & Show Servic meeting room/press conference. Checks must be made poscheduled installation day.			
BANK TRANSFER  Please reference your company name, exhibit and/or mer fees incurred will be the responsibility of the exhibitor.	eting room/press conference. Any	wire processing or transaction	
Bank transfer to: Comerica Bank, Detroit, MI 48226   ABA# Account # / Name: 1840263857   Conv			
For International Wire Transfer: Swift Code: MNBDUS33 Account # / Name: 18402	263857   Convention & Show Service	es, Inc.	
CREDIT CARD  For your convenience we accept Visa, MasterCard and Am by CSS in advance. By completing the information below y amount of your advance orders, deposit amount, and any representative acting on your behalf. Convention & Show our office prior to installation. Any balance that remains unpuber applicable.	ou are authorizing Convention & Sho additional charges that may be inc Services, Inc. requires this form to b	ow Services, Inc. to charge the curred on show-site by you or a be completed and returned to	
Your signature below indicates acceptance of all terms and	d conditions outlined in the Service N	Manual.	
ccount Number:	Expiration I	Date:	
ardholder Name (Print):	CVV:		
gnature:			