ELLIS COUNTY LIVESTOCK SHOW

ADD-ON BUYER FORM

Buyer(s) Name: _____

Company Name: _____

Mailing Address: _____

City_____ State_____ Zip Code_____

Phone Number _____ Email Address _____

Exhibitor #	Exhibitor Name	FFA/4H Club	Species	ADD- ON AMOUNT

By signing this form, you are acknowledging that you are an authorized representative of this organization and can ensure prompt payment. ***Authorized Signature***: _____ **Date**: _____

Please Invoice Me: _____ Pay Via Check: _____ Check #_____

Credit Card Number: _____ Exp. Date _____ CVC: _____ Zip Code: _____