



## 2020 Add-On Form

Buyer Name: \_\_\_\_\_ Buyer #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Lot #	Exhibitor's Name	\$ Amount

Total: \$ \_\_\_\_\_

**\*\*\*EXHIBITOR MUST MAKE THE AUCTION TO RECEIVE ANY ADD-ON CONTRIBUTION\*\*\***

**Check or Credit Card payment MUST accompany this form.**

**Make checks payable to: San Bernardino County fair**

**Copy of the Front and Back of the Credit Card must be mailed with this form**

**Mail to: 14800 7<sup>th</sup> Street, Victorville, CA 92395 Attn: Jennifer Monter**

**Payment Information**

Paid by: Check# \_\_\_\_\_ Money Order# \_\_\_\_\_

Please Bill my credit card: Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Sec/CVC# \_\_\_\_\_ Zip \_\_\_\_\_

Billing address if different than above: \_\_\_\_\_