

California Mid-State Fair 2021 Ticket Refund Form

Form must be completed if you purchased your tickets, in person, at the Box Office

❖ **PATRON INFORMATION:**

Name: _____

Mailing Address: _____

City, State, Zip code: _____

Contact Phone Number: (_____) _____

Contact Email Address: _____

❖ **METHOD OF PAYMENT USED TO PURCHASE TICKETS:**

Visa MasterCard American Express Cash Check

Credit Card Number: _____ Exp Date: _____ CVV: _____
(A representative will call for the credit card number above if you are not comfortable providing it at this time)

❖ **NUMBER OF TICKETS RETURNED AND ENCLOSED:**

Entertainment: _____ Admission: _____

❖ _____
PATRON SIGNATURE **DATE**

Office Use Only:

Date Received: _____

Total # of tickets received:

____ Entertainment @ \$ _____	Total \$ _____
____ Entertainment @ \$ _____	Total \$ _____
____ Entertainment @ \$ _____	Total \$ _____
____ Admission @ \$ _____	Total \$ _____
____ Admission @ \$ _____	Total \$ _____

Total Refund Due: \$ _____

Total Amount Refunded:

Method: Credit Card: \$ _____ CMSF Check: \$ _____ Check # _____

Date Processed: _____ Date Mailed to Patron: _____