



TROJAN EVENT SERVICES/TES CREDIT CARD AUTHORIZATION FORM

Name of Cardholder as it appears on credit card: _____

Cardholder's cell phone number: _____

This transaction is a: Payment Cleaning and Damages Deposit Both

Card Type (circle): VISA MC DISC AMEX Last 4 Digits of Card #: _____

Amount authorized: \$ _____ Event Name: _____

Reservation number: _____ Event Date: _____

Invoice number (if applicable): _____ Event Location: _____

I, _____, do hereby authorize the University of Southern California to charge my credit card for the amount indicated below as detailed on the invoice, Event Status Report, or reservation number referenced above.

Signature of Cardholder

Date

*******DO NOT COMPLETE THE BOTTOM PORTION OF THIS FORM*******

(In order for TES to be PCI compliant, do not fill in your credit card information. A TES production manager will call you to get your complete credit card number and billing address.)

Complete only the top portion, scan and email this form as an attachment.

**THIS BOTTOM PORTION OF THE FORM MUST BE FILLED OUT BY A TES
PRODUCTION MANAGER ONLY!!**

CARD INFORMATION *(Will be shredded immediately following authorization)*

Card Type: VISA MC DISC AMEX Full Card #: _____

Expiration Date: _____ Security Code (3 #s on back of card): _____

Billing Address: _____

Please submit this form to the location below which corresponds to your event location:

Tutor Campus Center, Ballroom, Outdoor

Locations, Tommy's Place:

USC Trojan Event Services
3607 Trousdale Parkway TCC 425
Los Angeles CA 90089-3103
Scevents@usc.edu / tcclrm@usc.edu /
odprod@usc.edu / tpprod@usc.edu
P: 213-764-4943

Bovard Auditorium:

USC Trojan Event Services/Bovard Office
3551 Trousdale Pkwy, ADM 200B
Los Angeles, CA 90089-4014
bovprod@usc.edu
P: 213-740-2222