

Remit to: Phil Long Expo Center, 1515 Auto Mall Loop, Colorado Springs, CO 80920
719-867-6635, Fax: 719-867-6631

ADVANCE ORDER DEADLINE DATE: (SEPTEMBER 21)

ELECTRICAL/PLUMBING ORDER FORM

COLORADO SPRINGS

WOMEN'S LIVING EXPO

OCTOBER 5-7, 2007

Booth # _____
 Exhibitor Name _____
 Contact Name _____
 Phone () _____ Fax () _____
 Email _____
 Address _____
 City/State _____ Zip _____

POWER & ACCESSORIES

QUANTITY	DESCRIPTION	ADVANCE	FLOOR ORDER	TOTAL
_____	120V - 5 AMP OUTLET - 500W	\$ 38.50 EACH	\$ 60.50 EACH	\$ _____
_____	120V - 10 AMP OUTLET - 1000W	\$ 77.00 EACH	\$ 99.00 EACH	\$ _____
_____	120V - 20 AMP OUTLET - 2000W	\$ 115.50 EACH	\$ 137.50 EACH	\$ _____
_____	208V - 3 PHASE - 20 AMP	\$ 165.00 EACH	\$ 187.00 EACH	\$ _____
_____	208V - SGL. PHASE - 50 AMP	\$ 187.00 EACH	\$ 220.00 EACH	\$ _____

Exhibitors are responsible for providing extension cords and power strips.

WATER & DRAIN

_____	WATER FILL AND DRAIN (UP TO 2,000 GALLONS)	\$ 132.00	\$ 242.00	\$ _____
_____	OVER 2,000 GALLONS TO 4000 GALLON ADD	\$ 44.00	\$ 55.00	\$ _____

TOTAL AMOUNT DUE \$ _____

EXHIBIT BOOTHS WILL BE INVENTORIED AT EVENT-SITE. SERVICES/ITEMS BEING USED AND NOT ORDERED, (PIRATING) WILL BE CHARGED AT THE "FLOOR ORDER RATE". EXHIBITORS REQUIRING 24-HOUR SERVICE, CLEAN OR DEDICATED LINES WILL BE CHARGED AT APPLICABLE RATES PLUS 25%. PLEASE NOTE ON THE ORDER FORM OR ADVISE THE FACILITY SERVICE DESK. PROPER TAGGING OF EQUIPMENT TO INDICATE VOLTAGE, PHASE, CURRENT, ETC. IS EXHIBITOR'S RESPONSIBILITY. ALL WIRING AND ELECTRICAL WORK ON EXHIBITOR'S DISPLAY WILL BE CHARGED ON A TIME & MATERIAL BASIS. LABOR RATES: \$61.00 PER HOUR, 8:00 AM - 4:00 PM, MONDAY THROUGH FRIDAY; ALL OTHER TIMES AND DAYS, \$115.00 PER HOUR. ONE-HOUR MINIMUM CHARGE. PHIL LONG EXPO CENTER WILL NOT BE HELD LIABLE FOR ANY DAMAGE TO EXHIBITOR'S EQUIPMENT.

***** ALL CHARGES MUST BE PAID BEFORE DELIVERY OF MATERIALS *****

ALL PRICES/SERVICES ARE SUBJECT TO CHANGE WITHOUT NOTICE

CREDIT CARD AUTHORIZATION INFORMATION: *A 4.5% ADMIN FEE WILL BE ADDED TO ALL CREDIT CARD TRANSACTIONS*

CARDHOLDER'S NAME _____ CARDHOLDER'S SIGNATURE _____

VISA OR MASTER CARD # _____ EXPIRATION DATE ____/____/____

ENCLOSE CHECK OR MONEY ORDER PAYABLE TO "PHIL LONG EXPO CENTER"

CHECK NUMBER _____ DATED _____ IN THE AMOUNT OF \$ _____

*PAYMENT BY CHECK MUST BE RECEIVED BEFORE ADVANCE ORDER DEADLINE