



ELECTRICAL EXHIBIT SERVICES

Name of Exhibition or Show: AL Cooperatve Extension Assn Date Needed: April 20 - 22, 2010
 Booth #: _____ Room: _____ Contact: _____
 Firm Name : _____ Phone : _____
 Address: _____ City: _____ State: _____ Zip: _____
 Signature: _____

Rates quoted below cover only the bringing of services to the booth and do not include connecting equipment or special wiring. All wiring and electrical work on exhibitor's display will be charged on a time and material basis. Proper tagginG of equipment to indicate voltage phase, current, etc..., are exhibitor's responsibility. The hotel is not responsible for power outages. **NO SIGNAGE TO BE HUNG ON DOORS OR WALLS.**

QUANTITY	ITEM	UNIT PRICE	# of Days	TOTAL
_____	110 V / 20 Amp	\$35.00	_____	\$0.00
_____	110 V / 30 Amp	\$45.00	_____	\$0.00
_____	208 V / 50 Amp	\$165.00	_____	\$0.00
_____	208 V / 30 Amp (3 phase)	\$140.95	_____	\$0.00
_____	208 V / 50 Amp (3 phase)	\$200.00	_____	\$0.00
_____	Extension Cord	\$10.00	_____	\$0.00
_____	Triple Receptacle	\$15.00	_____	\$0.00
_____	Banner/Sign - Small	\$10.00	_____	\$0.00
_____	Banner/Sign - Large	\$25.00	_____	\$0.00
_____	Other _____		_____	\$0.00
_____	Other _____		_____	\$0.00
_____	Analog Phone Line - Fax & CC	\$75.00 per day	_____	\$0.00
_____	Direct Inward Dial Line	\$100.00 per day	_____	\$0.00
_____	House Phone Line	\$25.00 per day	_____	\$0.00
_____	IBAHN Internet Service HSIA Wireless or Wired	\$150.00 connection per day	_____	\$0.00
_____	IBAHN Internet Service HSIA Wireless or Wired	\$55.00 per/line, room, day	_____	\$0.00
_____	TV/VCR Package	\$165.00 per room per day	_____	\$0.00
_____	TV Monitors	\$85.00 per day	_____	\$0.00
_____	LCD Package	\$450.00 per day	_____	\$0.00
TOTAL				\$0.00
Tax - 10%				\$0.00
GRAND TOTAL				\$0.00

PAYMENT METHOD - check one

Check - please enclose _____
 Credit Card - please fill out form below _____
Include a copy of the front/back of the credit card
 Individual Name on Card _____
 Card Number _____ Exp Date _____
 Approximate Amount _____
 Mailing Address _____
 Phone Number _____ Fax Number _____
 Cardholder's Signature _____ Date _____