

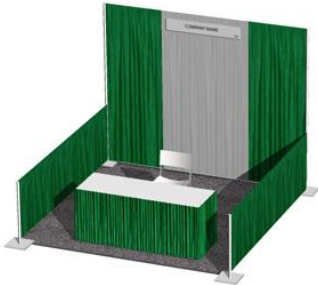
SHOW SPECIAL

We are pleased to announce a show special for the Schaumburg Lake Home & Cabin Show. Please take advantage of this special offer at the discounted rates below. The discount rate will not be available after January 1st, 2019. All orders received after January 1st will be processed at the standard rate.

This is a special offer. The items listed are available in only the colors listed. There are no substitutions or exchanges.

10' x 10' Furniture Package

- 1 – 10' x 10' Carpet
- 1 – 6' x 30" Draped Table
- 1 – Plastic Side Chairs
- 1 – Wastebasket



10' x 10' Furniture Package

- 1 – 10' x 20' Carpet
- 1 – 6' x 42" Draped Table
- 1 – Plastic Side Chairs
- 1 – Wastebasket



Discount Rate: January 1st or sooner
Standard Rate: January 2nd or later

Item	Qty	Discount	Standard	Total
Show Special				
10' x 10' Furniture Package		\$262.40	\$346.00	
10' x 10' Furniture Package		\$307.75	\$510.00	
Table Drape Color Selection <input type="checkbox"/> Black <input type="checkbox"/> Green <input type="checkbox"/> Grey				
Carpet Color Selection <input type="checkbox"/> Black <input type="checkbox"/> Green <input type="checkbox"/> Grey				
Subtotal Show Special				\$

The Recap of Orders form must be submitted with all orders.

Exhibiting Company _____ Booth # _____

RECAP OF ORDERS

SERVICES ORDERED

Taxable Services	
Furnishings & Accessories	\$
Tables	\$
Floor Covering	\$
Booth Package	\$
Executive Furnishings	\$
Rental Displays	\$
Booth Cleaning	\$
10% Sales Tax*	\$
<small>*All tax exempt orders must be submitted with a completed ST3 Certificate of Tax Exemption Form. The ST3 Form is located toward the end of this service kit.</small>	
Non-Taxable Services	
Signs & Banners	\$
Material Handling / Forklift Service (must have cc on file)	\$
Labor (must have cc on file)	\$
Grand Total	\$

METHOD OF PAYMENT

Credit Card
 Card Number _____
 Card Type Visa Master Card Discovery American Express Exp _____ CVV _____
 Card Holder Name _____
 Card Holder Signature _____
 Billing Address _____
 City/State/Zip _____ Phone _____

EXHIBITING COMPANY

Company _____ Booth # _____
 Street Address _____
 City _____ State _____ Zip _____
 Contact Name _____ Email Address _____
 Phone _____ Fax _____