

Video Equipment	Qty	Pre-Show Rate	On-Site Rate	Total	Customer Information
1/2" VHS Player with Repeat		\$165	\$198		PLEASE PRINT Firm Name: Address: City: State: Zip Code: Ordered By: Telephone: Fax: e-Mail:
1/2" Tri - Standard Player ( NTSC / PAL / SECAM )		\$285	\$342		
DVD Player		\$150	\$180		
20" Video Monitor with External Speakers		\$155	\$186		
25 " Video Monitor with External Speakers		\$220	\$264		
27" Video Monitor		\$250	\$300		
20" VHS / Monitor Combo		\$195	\$234		
34" Monitor Cart with Skirt		\$45	\$54		
54" Monitor Cart with Skirt		\$60	\$72		

Video / Data Display	Qty	Pre-Show Rate	On-Site Rate	Total	Information for Delivery
Video / Data LCD Projector ( 3300 Lumens )		\$800	\$960		Exhibit Booth#: On Site Contact: Ph.-Cell-Pager: Delivery Date: Time: Signature: Representative <b>MUST BE</b> on-site at above for Delivery. Exhibitor assumes responsibility for Loss or Damage to property of Projection after Delivery and acceptance at Booth.
Video / Data LCD Projector ( 5000 Lumens )		\$1,100	\$1,320		
17" LCD Flat Screen Monitor ( DATA ONLY )		\$125	\$150		
20" LCD Flat Screen Monitor ( DATA ONLY )		\$200	\$240		
24" LCD Flat Screen Monitor		\$350	\$420		
32" LCD Flat Screen Monitor		\$450	\$540		
42" Plasma Display Panel ( VGA - SXGA ) 16:9 Ratio		\$750	\$900		
50" Plasma Display Panel ( VGA - SXGA ) 16:9 Ratio		\$950	\$1,140		
60" Plasma Display Panel ( 16:9 Ratio )		\$1,150.00	\$1,380		
Plasma Display Mounts for above: <b>PLEASE CIRCLE ONE</b>					

Projection / Screens	Qty	Pre-Show Rate	On-Site Rate	Total	Orders <u>not</u> received 1 week prior to first show date will be subject to the <b>ON-SITE SHOW RATE</b> <b>First Exhibit Date: 04/20/2010</b>
Audio Viewer / Slide Projector		\$135	\$162		<b>Ordering Instructions</b> <input type="checkbox"/> Charges for requested items selected are for the <b>Entire Event.</b> <input type="checkbox"/> Wall Mounting and removal of large monitors is the responsibility of the contracted decorating company <input type="checkbox"/> Include applicable Sales Tax on equipment and or labor. <b>Tax Exempt Certificate</b> must be on file for the <b>State of Venue</b> to claim status before services are provided. <input type="checkbox"/> <b>Installation / Dismantle Fee</b> includes delivery, install, maintenance and dismantle. Contact <b>Exhibit Services</b> for in-booth operation. <input type="checkbox"/> <b>Cancellation</b> of equipment ordered must be received <b>72 hours prior</b> to delivery date to avoid a one day charge. If delivered, <b>100%</b> of charges will apply. <input type="checkbox"/> Call <b>617-385-5099</b> , or e-Mail us with questions or concerns as well as additional requirements <a href="mailto:dgrabowski@projection.com">dgrabowski@projection.com</a>
35 mm Wireless Remote		\$75	\$90		
5' Tripod Screen with Skirt		\$60	\$72		
6' Tripod Screen with Skirt		\$65	\$78		
7' Tripod Screen with Skirt		\$70	\$84		
8' X 8' Fastfold Screen / Front with Skirt		\$135	\$162		

Audio Equipment	Qty	Pre-Show Rate	On-Site Rate	Total
Wired Microphone ( Lavalier - Headset - Handheld )		\$75	\$90	
Wireless Microphone Kit ( Lavalier - Headset - Handheld )		\$280	\$336	
Liberty Sound System ( 2-Speakers, Mixer/Amp, Stands )		\$350	\$420	
EAW Sound System ( 2-Speakers, Mixer/Amp, Stands )		\$675	\$810	
Powered Speaker ( Stand or Wall Mount )		\$160	\$192	
CD Player		\$95	\$114	
Cassette Player		\$85	\$102	

Totals	PAYMENT IS DUE WHEN ORDER IS PLACED			
EQUIPMENT TOTAL:	1			
DELIVERY/SET-UP/PICKUP: ( 35% of line 1 or \$90.00 minimum )	2			
SUBTOTAL:	3			
STATE SALES TAX: ( 5% of line 1 )	4			
TOTAL DUE:	5			

Method of Payment	PLEASE CHECK ONE
For Credit Card payment, Please complete attached Credit Card Authorization Form	
Cardholder's Name (as appears on card):	
Cardholders Signature:	<input type="checkbox"/> Check ( US Only ) <input type="checkbox"/> Wire Transfer (US)

**Information for Delivery**

Exhibit Booth#:  
On Site Contact:  
Ph.-Cell-Pager:  
Delivery Date: Time:  
Signature:  
Representative **MUST BE** on-site at above for Delivery.  
Exhibitor assumes responsibility for Loss or Damage to property of Projection after Delivery and acceptance at Booth.

Orders not received 1 week prior to first show date will be subject to the **ON-SITE SHOW RATE**  
**First Exhibit Date: 04/20/2010**

**Ordering Instructions**

- Charges for requested items selected are for the **Entire Event.**
- Wall Mounting and removal of large monitors is the responsibility of the contracted decorating company
- Include applicable Sales Tax on equipment and or labor. **Tax Exempt Certificate** must be on file for the **State of Venue** to claim status before services are provided.
- Installation / Dismantle Fee** includes delivery, install, maintenance and dismantle. Contact **Exhibit Services** for in-booth operation.
- Cancellation** of equipment ordered must be received **72 hours prior** to delivery date to avoid a one day charge. If delivered, **100%** of charges will apply.
- Call **617-385-5099**, or e-Mail us with questions or concerns as well as additional requirements [dgrabowski@projection.com](mailto:dgrabowski@projection.com)

**Processing**


Fax Form To: **617-385-5093** or mail it to



**Seaport World Trade Center In-House Office**  
 200 Seaport Blvd., Suite 301, Boston, MA 02210  
 PH: 617-385-5099 FAX: 617-385-5093  
[dgrabowski@projection.com](mailto:dgrabowski@projection.com)

**COMPUTER**

**MULTI DAY ORDER FORM**

PC Compatibles					Customer Information				
Qty	Pre-Show Rate	On-Site Rate	Total	PLEASE PRINT					
	\$250	\$300		Firm Name:					
	\$350	\$420		Address:					
	\$375	\$450		City:					
	<b>CALL</b>	<b>CALL</b>		State:		Zip Code:			
	<b>CALL</b>	<b>CALL</b>		Ordered By:					
	<b>CALL</b>	<b>CALL</b>		Telephone:					
				Fax:					
				e-Mail:					
Computer Display Equipment					Information for Delivery				
Qty	Pre-Show Rate	On-Site Rate	Total	Exhibit Booth#:					
	\$125	\$150		On Site Contact:					
	\$200	\$240		Ph.-Cell-Pager:					
	\$350	\$420		Delivery Date:		Time:			
	\$450	\$540		Signature:					
	\$750	\$900		Representative <b>MUST BE</b> on-site at above for Delivery.					
	\$950	\$1,140		Exhibitor assumes responsibility for Loss or Damage to property of Projection after Delivery and acceptance at Booth.					
	\$1,150.00	\$1,380		Orders <u>not</u> received 1 week prior to first show date will be subject to the <b>ON-SITE SHOW RATE</b>					
Plasma Display Mounts for above: <b>PLEASE CIRCLE ONE</b>					Table Top				
					Wall Mount				
					Floor Stand				
Laptop Computer					Ordering Instructions				
Qty	Pre-Show Rate	On-Site Rate	Total	<input type="checkbox"/> Charges for requested items selected are for the <b>Entire Event.</b>					
	\$375	\$450		<input type="checkbox"/> Wall Mounting and removal of large monitors is the responsibility of the contracted decorating company					
	\$475	\$570		<input type="checkbox"/> Include applicable Sales Tax on equipment and or labor. <b>Tax Exempt Certificate</b> must be on file for the <b>State of Venue</b> to claim status before services are provided.					
Printers					<input type="checkbox"/> <b>Installation / Dismantle Fee</b> includes delivery, install, maintenance and dismantle. Contact <b>Exhibit Services</b> for in-booth operation.				
	\$250	\$300		<input type="checkbox"/> <b>Cancellation</b> of equipment ordered must be received <b>72 hours prior</b> to delivery date to avoid a one day charge. If delivered, <b>100%</b> of charges will apply.					
	\$450	\$540		<input type="checkbox"/> Call <b>617-385-5099</b> , or e-Mail us with questions or concerns as well as additional requirements <a href="mailto:dgrabowski@projection.com">dgrabowski@projection.com</a>					
Accessories					<b>Processing</b>				
	\$50	\$60		Fax Form To: <b>617-385-5093</b> or mail it to					
	\$35	\$42		 <p><b>Seaport World Trade Center In-House Office</b>          200 Seaport Blvd., Suite 301, Boston, MA 02210          PH: 617-385-5099 FAX: 617-385-5093  <a href="mailto:dgrabowski@projection.com">dgrabowski@projection.com</a></p>					
	\$35	\$42							
	\$45	\$54							
	\$30	\$36							
	\$30	\$36							
Totals					PLEASE CHECK ONE				
EQUIPMENT TOTAL:					1				
DELIVERY/SET-UP/PICKUP: ( 35% of line 1 or \$90.00 minimum )					2				
SUBTOTAL:					3				
STATE SALES TAX: ( 5% of line 1 )					4				
TOTAL DUE					5				
Method of Payment					<input type="checkbox"/> Check ( US Only ) <input type="checkbox"/> Wire Transfer (US)				
For Credit Card payment, Please complete attached Credit Card Authorization Form									
Cardholder's Name (as appears on card):									
Cardholders Signature:									



**PROJECTION VIDEO SERVICES, INC**  
**DBA/Projection Presentation Technology, Inc**  
**5803 ROLLING ROAD, SUITE 207**  
**SPRINGFIELD, VA 22152**

**CREDIT CARD PAYMENT AUTHORIZATION FORM**

**Date** \_\_\_\_\_

**Credit Cards Holder's Name** \_\_\_\_\_  
(As it appears on the credit card)

**Credit Card Type** \_\_\_\_\_  
(Visa, MasterCard, Amex, Other)

**Credit Card #** \_\_\_\_\_

**Credit Card Expiration Date** \_\_\_\_\_

**Amount** \_\_\_\_\_

**Billing Address of Credit Card:**

\_\_\_\_\_  
\_\_\_\_\_

**Invoice # or Booth #** \_\_\_\_\_

**Authorized Signature** \_\_\_\_\_

**Name and Title** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_



**PROJECTION VIDEO SERVICES, INC**  
**DBA/Projection Presentation Technology, Inc**  
**5803 ROLLING ROAD, SUITE 207**  
**SPRINGFIELD, VA 22152**

**CREDIT CARD PAYMENT AUTHORIZATION FORM**

**Date** \_\_\_\_\_

**Credit Cards Holder's Name** \_\_\_\_\_  
(As it appears on the credit card)

**Credit Card Type** \_\_\_\_\_  
(Visa, MasterCard, Amex, Other)

**Credit Card #** \_\_\_\_\_

**Credit Card Expiration Date** \_\_\_\_\_

**Amount** \_\_\_\_\_

**Billing Address of Credit Card:**

\_\_\_\_\_  
\_\_\_\_\_

**Invoice # or Booth #** \_\_\_\_\_

**Authorized Signature** \_\_\_\_\_

**Name and Title** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_