

RETURN TO: Global Experience Specialists, Inc. (GES) • 7050 Lindell Road, Las Vegas, NV 89118-4702 • Fax: 866.329.1437 or 702.263.1520 for international exhibitors  
 Contact us Online: www.ges.com/chat Phone: 800.475.2098 or 702.515.5970 for international exhibitors

All orders are governed by the GES Payment Policy and GES Terms & Conditions of Contract as specified in this Exhibitor Services Manual.

**Imaging USA**  
 New Orleans Ernest N Morial Convention Center  
 January 15 - 17, 2012

**Form Deadline Date:**  
 December 23, 2011

**MANDATORY FORM\***

COMPANY NAME	EMAIL ADDRESS	BOOTH NUMBER		
STREET ADDRESS	CITY	STATE	ZIP	COUNTRY
PHONE	FAX	PURCHASE ORDER NUMBER		
SHOWSITE CONTACT	SHOWSITE CONTACT EMERGENCY PHONE NUMBER	CONTACT'S HOTEL (OPTIONAL)		

**Payment Policy**

**Payment for Services** — GES requires payment in full at the time services are ordered. Further, GES requires that you provide a credit card authorization with your initial order. For your convenience, we will use this authorization to charge your account for services, which may include labor, material handling, or any applicable fuel or energy surcharge.

**Discount Prices** — To qualify for discount pricing, orders must be received with payment on or before the discount price deadline(s).

**Method of Payment** — Global Experience Specialists accepts MasterCard, Visa, American Express, check and bank wire transfer. Purchase orders are not considered payment. All payments must be made in U.S. funds drawn on a U.S. Bank. Exhibitors will be charged a \$50.00 fee for returned NSF checks.

**Third Party Billing** — Each exhibiting firm is ultimately responsible for all charges incurred on its behalf. Global Experience Specialists reserves the right to institute collection action against the exhibitor if the authorized third party does not pay. See *Third Party Billing Request* form.

**Tax Exempt** — If you are tax exempt in the state in which you will be exhibiting, you must provide a Sales Tax Exemption Certificate for that state. Please send the above information to the GES office for this show. Taxes vary by location and will be added to your invoice, if you do not submit your tax exempt certificate prior to the deadline.

**Adjustments and Cancellations** — No adjustments to invoices will be made after the close of the show. Please refer to the individual forms for labor, etc., for cancellation fees. All orders cancelled by the Exhibitor or due to the cancellation of an event or their non-participation may be subject to cancellation fees equal to 50% - 100% of the total order, based upon the status of move-in, work performed and/or GES set-up costs or expenses. A minimum non-refundable deposit of \$25.00 will be applied towards the invoice, unless there is a cancellation of your order. Additionally, GES retains the right to implement/assess a fuel or energy surcharge on all services as necessary based upon market conditions.

**Bank wire transfer payment information:**

**Beneficiary: Global Experience Specialists**  
 c/o Bank of America **Account #:** 7188-1-01819  
 901 Main Street, TX1-492-07-14 **ABA Routing #:** 0260-0959-3  
 Dallas, TX 75202-3714 USA **SWIFT Address:** BOFAUS3N  
 Telephone # 800-657-9533 ext 59248 **CHIPS Address:** 0959

**If requested, following is the physical address for routing identifiers:**

Bank of America, Wire Transfer-Customer Services  
 2000 Clayton Road, Concord, CA 94520 USA

**To properly credit your account,** send the following information to the GES address listed on the order forms:

- exhibiting company name, show name, show facility, and booth number
- date and amount of wire transfer
- bank and country where transfer originated

- If you have any questions regarding our payment policy, please call GES National Servicer® at 800.475.2098 or visit the GES Servicer® at the show.
- Please complete the information and return payment in full with this form and your orders. You may choose to pay by credit card, check, or bank wire transfer, however, we require your credit card charge authorization to be on file with GES.
- All balances must be paid at the conclusion of the event. You agree to late fees up to 1.5% per month on any balance not paid at the conclusion of the event, or balance left without appropriate credit card on file.
- For your convenience, we will use this authorization to charge your credit card for any additional amounts ordered by your representative or services rendered to your company for this event.
- GES will charge a convenience fee for each request to reprocess payment to an alternate credit card in order to cover incremental processing costs. An alternate credit card is a credit card different than the one used to process your initial payment in accordance with GES payment policy. The convenience fee will be quoted at the time your request is made to reprocess payment. The convenience fee will be added to your account balance and settled utilizing the new credit card provided.

GES requires the highest standards of integrity from all employees. Please call our confidential Always Honest hotline at 866.225.8230 to report fraudulent or unethical behavior.

\*This form must be returned to GES for your orders to be processed.

**Credit Card Charge Authorization**

All information must be provided. **Your order will not be processed if any information is missing.** (i.e., Expiration Date, Account Number, Contact Information, Type of Card, Signature) **We require your credit card charge authorization to be on file with GES even if you are paying by check or bank wire transfer.**

**Account Number**  Corporate Card  Personal Card

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**PROVIDE EXPIRATION DATE** **EXPIRATION DATE**  MasterCard  VISA  American Express

\*Signature Required Below

CARDHOLDER'S NAME PLEASE PRINT \_\_\_\_\_

CARDHOLDER'S BILLING ADDRESS CITY \_\_\_\_\_

STATE ZIP COUNTRY \_\_\_\_\_

**Calculation of Orders**

	TOTAL
Material Handling	\$
Carpet	\$
Furniture & Accessories	\$
Specialty Furniture	\$
Standard Exhibit Systems	\$
Graphics & Signage	\$
Installation & Dismantling Labor	\$
In-Booth Forklift & Labor	\$
Hanging Sign Labor	\$
Cleaning	\$
Other GES Services (Specify)	\$
Other GES Services (Specify)	\$
Other GES Services (Specify)	\$
<b>FULL PAYMENT in U.S. funds drawn on a U.S. Bank</b> <small>Global Experience Specialists Federal ID #59-1008863                  GES is exempt from backup withholding tax.</small>	<b>\$</b>

**To simplify payment,** send a check payable to Global Experience Specialists, Inc. (GES) for your entire order or note the amount to be charged to your credit card.

Charge my credit card in the amount of: \$ \_\_\_\_\_

Enclosed is a check in the amount of: \$ \_\_\_\_\_

Check Number: \_\_\_\_\_ Dated: \_\_\_\_\_

**I agree in placing this order that I have accepted GES Payment Policy and GES Terms & Conditions of Contract. \*Credit card charge authorization signature required below.**

**PLEASE SIGN** X \_\_\_\_\_  
 AUTHORIZED SIGNATURE / CARDHOLDER'S SIGNATURE

\_\_\_\_\_  
 AUTHORIZED NAME - PLEASE PRINT DATE

**NEED ASSISTANCE?**

Toll Free: 800.475.2098 Tel: 702.515.5970 www.ges.com/chat

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## Imaging USA

New Orleans Ernest N Morial Convention Center  
 January 15 - 17, 2012

**Form Deadline Date:**  
 December 23, 2011

COMPANY NAME	EMAIL ADDRESS	BOOTH NUMBER
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You may arrange for a third party to handle your display and be billed for services. GES will agree to this arrangement if the third party has a satisfactory payment record with us. **Both the Exhibiting Firm and Third Party must complete this form, including Third Party Credit Card Charge Authorization below.** Return form by the deadline date. **GES reserves the right to deny any Third Party Billing Request that is not complete or received by the deadline date.**

It is understood and agreed that the exhibiting firm is ultimately responsible for payment of charges. If your named third party does not pay the invoice before the last day of the show, charges will revert to you, the exhibiting firm. All invoices are due and payable upon receipt. GES Terms & Conditions of Contract apply to both the Exhibiting Firm and Third Party Representative.

Exhibiting Firm			
EXHIBITING FIRM			
STREET ADDRESS			
CITY	STATE	ZIP	
PHONE	FAX		

*The items checked below are to be invoiced to the Exhibiting Firm:*

- |   |   |
|---|---|
| <input type="checkbox"/> Booth Cleaning               | <input type="checkbox"/> Rental Furniture           |
| <input type="checkbox"/> Rental Carpet                | <input type="checkbox"/> Exhibit Systems            |
| <input type="checkbox"/> Signs                        | <input type="checkbox"/> I & D Labor                |
| <input type="checkbox"/> In-Booth Forklift Labor      | <input type="checkbox"/> Material Handling In & Out |
| <input type="checkbox"/> Transportation Charges       |   |
| <input type="checkbox"/> Other (Please Specify) _____ |   |

Third Party			
THIRD PARTY			
STREET ADDRESS			
CITY	STATE	ZIP	
PHONE	FAX		

*The items checked below are to be invoiced to the Third Party:*

- |   |  |
|---|--|
| <input type="checkbox"/> All Services                 | <input type="checkbox"/> Booth Cleaning          |
| <input type="checkbox"/> Rental Furniture             | <input type="checkbox"/> Rental Carpet           |
| <input type="checkbox"/> Exhibit Systems              | <input type="checkbox"/> Signs                   |
| <input type="checkbox"/> I & D Labor                  | <input type="checkbox"/> In-Booth Forklift Labor |
| <input type="checkbox"/> Material Handling In & Out   | <input type="checkbox"/> Transportation Charges  |
| <input type="checkbox"/> Other (Please Specify) _____ |  |

### Exhibiting Firm Credit Card Charge Authorization

All information must be provided. **Your order will not be processed if any information is missing.** (i.e., Expiration Date, Account Number, Contact Information, Type of Card, Signature) **We require your credit card charge authorization to be on file with GES even if you are paying by check or bank wire transfer.**

Account Number  Corporate Card  Personal Card

	-		-		-	
--	---	--	---	--	---	--

**PROVIDE EXPIRATION DATE**  MasterCard  VISA  American Express

	-		-		-	
--	---	--	---	--	---	--

CARDHOLDER'S NAME	PLEASE PRINT	
CARDHOLDER'S BILLING ADDRESS		
STATE	ZIP	COUNTRY

**I agree in placing this order that I have accepted GES Payment Policy and GES Terms & Conditions of Contract. Credit card charge authorization signature required below.**

**PLEASE SIGN**  \_\_\_\_\_  
 AUTHORIZED SIGNATURE / CARDHOLDER'S SIGNATURE

\_\_\_\_\_  
 AUTHORIZED NAME - PLEASE PRINT

\_\_\_\_\_  
 DATE

### Third Party Credit Card Charge Authorization

All information must be provided. **Your order will not be processed if any information is missing.** (i.e., Expiration Date, Account Number, Contact Information, Type of Card, Signature) **We require your credit card charge authorization to be on file with GES even if you are paying by check or bank wire transfer.**

Account Number  Corporate Card  Personal Card

	-		-		-	
--	---	--	---	--	---	--

**PROVIDE EXPIRATION DATE**  MasterCard  VISA  American Express

	-		-		-	
--	---	--	---	--	---	--

CARDHOLDER'S NAME	PLEASE PRINT	
CARDHOLDER'S BILLING ADDRESS		
STATE	ZIP	COUNTRY

**I agree in placing this order that I have accepted GES Payment Policy and GES Terms & Conditions of Contract. Credit card charge authorization signature required below.**

**PLEASE SIGN**  \_\_\_\_\_  
 AUTHORIZED SIGNATURE / CARDHOLDER'S SIGNATURE

\_\_\_\_\_  
 AUTHORIZED NAME - PLEASE PRINT

\_\_\_\_\_  
 DATE

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SHOWSITE CONTACT	SHOWSITE CONTACT PHONE #	DATE/TIME OF ARRIVAL
		CONTACT'S HOTEL (OPTIONAL)

**A unique grid must be completed for each of the following services to ensure proper placement of items in your booth. Please do not combine services onto a single grid. Print/photocopy as needed.**

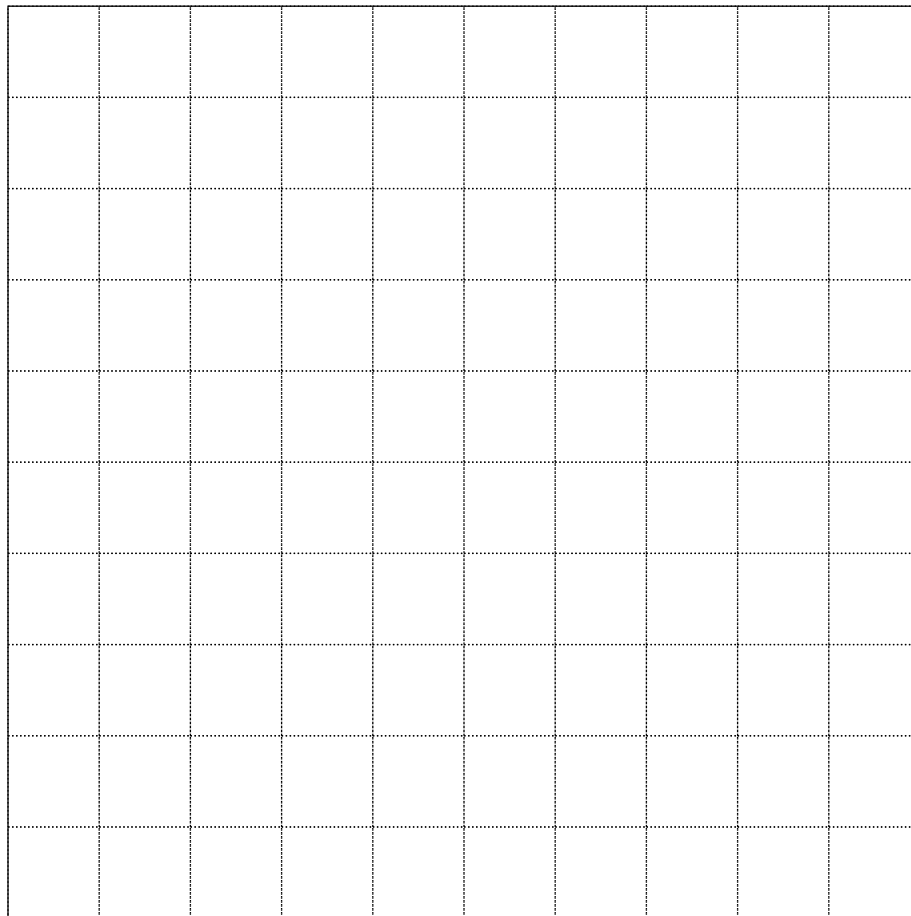
- Show Cases - Form A-1
- Pegboard / Tackboard - Form A-1
- Special Colored Drape - Form A-1
- Standard Exhibit Systems (if exhibit size is smaller than booth size) - Form D-1
- Pad and Carpet (if you are not carpeting your entire booth) - Form C-1
- Installation & Dismantling - Form L-1

To use this grid:

- Use bold lines to indicate the outline of your booth.
- Indicate the scale of the grid (i.e. 1 square = 1 foot) or indicate the dimensions of your booth.
- Mark the adjacent booth numbers or aisle numbers.

Each square is \_\_\_\_\_ feet square since my booth is \_\_\_\_\_ feet wide by \_\_\_\_\_ feet long.

**BACK OF BOOTH** (indicate adjacent booth or aisle number: \_\_\_\_\_)



Indicate  
 Adjacent  
 Booth or  
 Aisle Number:  
 \_\_\_\_\_

Indicate  
 Adjacent  
 Booth or  
 Aisle Number:  
 \_\_\_\_\_

**FRONT OF BOOTH** (indicate adjacent booth or aisle number: \_\_\_\_\_)

**\*This form must be returned to GES for your orders to be processed.**