Brede EXPOSITION SERVICES ALLIED Convention Services Division 2502 Lake Orange Drive, Orlando, FL 32837 * 407/851-0261 * FAX 407/859-3904 CLEANING ORDER FORM Vacuuming of booths and emptying of wastebaskets is not included in your booth space rental. If you require these services, you must order them. **BOOTH CLEANING** _Once Only Vacuuming of Booth (Prior to show opening) \$.36 per square foot Daily Vacuuming - including emptying wastebaskets \$.26 per square foot (Please specify number of days) Shampoo Booth Carpet \$.62 per square foot SIZE OF BOOTH_____X___ = ____SQ.FT.* X RATE:_____ X NO. OF DAYS:_____ = \$_____ * Minimum Charge: 100 Sq. Ft. Per Day Note: There will be an additional labor charge for cleaning carpets that are subjected to excessive wear- and -tear such as wood or metal shavings generated by demonstrations in the booth or food sampling. PERIODIC PORTER SERVICE We will remove refuse from containers in your booth once an hour, show hours only, on a daily basis. If you require this service, please indicate your requirements below: Up to 1,000 sq. ft. \$109.25 per day 4,001 - 5,000 sq. ft. \$218.50 per day 1,001 - 1,500 sq. ft. \$121.25 per day 5,001 - 6,000 sq. ft. \$243.75 per day 1,501 - 2,000 sq. ft. \$132.25 per day 6,001 - 7,000 sq. ft. \$269.25 per day 2,001 - 3,000 sg. ft. \$167.75 per day 7,001 - 8,000 sq. ft. \$294.50 per day 3,001 - 4,000 sq. ft. \$193.00 per day 8,001 - 9,000 sq. ft. \$319.75 per day Days required: ______ @ \$_____ per day = \$_____ MANDATORY PORTER SERVICE (FOOD SERVICE & GIVEAWAYS) Days required:______ @ \$_____ per day = \$_____ All carpets ordered from us are installed clean for your use. However, you may want to order cleaning services for debris created during set-up. Our exclusive cleaning contract for this show will not permit other service contractors to provide this service. BOOTHS CREATING EXCESSIVE AMOUNTS OF TRASH WILL BE SUBJECT TO ADDITIONAL SERVICES & FEES. NO CREDIT WILL BE ISSUED AFTER THE CLOSE OF THE SHOW 1. Total All Items Ordered 2. 8% Sales and/or Use Tax \$ 3. Amount of Payment ALL OPEN BALANCES MUST BE PAID IN FULL AT SHOW SITE EVENT OR SHOW _____ ASCO 2006_____ HALL ____ GEORGIA WORLD CONGRESS CENTER_____ _____ BOOTH #_____ COMPANY NAME ADDRESS______ TELEPHONE #_____ FAX #_____ _____ STATE_____ ZIP CODE CITY AUTHORIZED BY:(PLEASE PRINT OR TYPE) TITLE SIGNATURE