

SPECTRUM ASSOCIATES, INC.
TRADE SHOW & SPECIAL EVENT SERVICES
69 BOHAC STREET
SWOYERSVILLE, PA 18704
PHONE: (570) 331-2400 FAX: (570) 331-3088 TOLL FREE: 1-800-972-3650
FURNITURE RENTAL ORDER FORM

EMPIRE FARM DAYS
ADVANCE ORDER DEADLINE – July 23, 2010

AFTER JULY 28, 2010 ALL FURNITURE ITEMS MUST BE PLACED ON THE FLOOR, WHILE SUPPLIES LAST.
NOTE – We cannot guarantee items will be available at the show, so order in advance, if possible. No refund will be issued after item has been reserved.

<u>DISPLAY TABLES & RISERS</u>					<u>FURNITURE ITEMS</u>				
<u>QTY</u>	<u>DESCRIPTION</u>	<u>ADVANCE</u>	<u>LATE</u>	<u>TOTAL</u>	<u>QTY</u>	<u>DESCRIPTION</u>	<u>ADVANCE</u>	<u>LATE</u>	<u>TOTAL</u>
___	2'x4'x30" HIGH - TABLE ONLY	\$20.00	\$25.00	\$ _____	___	FOLDING CHAIR	\$ 2.50	\$ 5.00	\$ _____
___	2'x4'x42" HIGH - TABLE ONLY	\$25.00	\$31.25	\$ _____	___	WASTEBASKET	\$ 5.00	\$ 8.00	\$ _____
___	2'x6'x30" HIGH - TABLE ONLY	\$30.00	\$37.50	\$ _____	___	COUNTER STOOL	\$ 30.00	\$ 37.50	\$ _____
___	2'x6'x42" HIGH - TABLE ONLY	\$35.00	\$43.75	\$ _____	___	PEGBOARD	\$120.00	\$150.00	\$ _____
___	2'x8'x30" HIGH - TABLE ONLY	\$40.00	\$50.00	\$ _____	___	TACKBOARD	\$120.00	\$150.00	\$ _____
___	2'x8'x42" HIGH - TABLE ONLY	\$45.00	\$56.25	\$ _____	___	SIGN EASEL	\$ 25.00	\$ 31.25	\$ _____
___	2'x4'x30" TABLE & SKIRT	\$30.00	\$37.50	\$ _____	___	CLOTHING RACK	\$ 30.00	\$ 37.50	\$ _____
___	2'x4'x42" TABLE & SKIRT	\$35.00	\$43.75	\$ _____	<u>MASKING DRAPE</u>				
___	2'x6'x30" TABLE & SKIRT	\$40.00	\$50.00	\$ _____	8' - \$3.50 Linear Foot :	_____ X \$3.50 =	\$ _____		
___	2'x6'x42" TABLE & SKIRT	\$45.00	\$56.25	\$ _____		(FEET)			
___	2'x 8'x30" TABLE & SKIRT	\$50.00	\$62.50	\$ _____	3' - \$3.00 Linear Foot :	_____ X \$3.00 =	\$ _____		
___	2'x 8'x42" TABLE & SKIRT	\$55.00	\$68.75	\$ _____		(FEET)			
___	10"x4' TABLE RISER & COVER	\$30.00	\$37.50	\$ _____					
___	10"x6' TABLE RISER & COVER	\$40.00	\$50.00	\$ _____					

CIRCLE COLOR OF SKIRTING: Black / Red / Blue/ Gold/ White/ Teal/ Silver / Burgundy

TOTAL COST _____

NY Sales Tax (8%) _____

TOTAL DUE _____

 Exhibitor _____

Mailing Address _____

Phone _____ Fax _____

Credit Card: VS _____ MC _____ AMX _____ DISCOVER _____ Enclosed Check# _____

Credit Card # _____ Last 3 - 4 Digits on Back _____ Exp Date _____

Cardholder Name _____ Print Name _____

Cardholder Signature _____

PLEASE COMPLETE THE INFORMATION REQUESTED AND RETURN PAYMENT IN FULL WITH THIS FORM. YOU MAY PAY BY CREDIT CARD OR CHECK, HOWEVER, **WE REQUIRE YOUR CREDIT CARD AUTHORIZATION TO BE ON FILE WITH SPECTRUM.** FOR YOUR CONVENIENCE, WE WILL USE THIS AUTHORIZATION TO CHARGE YOUR CREDIT CARD FOR ANY ADDITIONAL AMOUNTS INCURRED AS A RESULT OF SHOW SITE ORDERS PLACED BY YOUR REPRESENTATIVE FOR THIS EVENT.