

FREEMAN

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**DEADLINE DATE
SEPTEMBER 17, 2009**

**INCLUDE THE FREEMAN
METHOD OF PAYMENT
FORM WITH YOUR ORDER**

NAME OF SHOW: ISA EXPO 2009 / 6 - 8 OCTOBER

COMPANY NAME _____ BOOTH #: _____

CONTACT NAME: _____ PHONE #: _____

E-MAIL ADDRESS _____

For Assistance, please call 713-433-2400 to speak with one of our experts.

For fast, easy ordering, go to www.myfreemanonline.com

DISPLAY LABOR (One Hour Minimum per Worker)

Description	Advance Price	Show Site Price
Straight Time- 8:00 A.M. to 4:30 P.M. Monday through Friday	\$ 67.10	\$ 87.20
Overtime- 6:00 A.M. to 8:00 A.M. and 4:30 P.M. to 12:00 Midnight Monday through Friday		
6:00 A.M. to 12:00 Midnight Saturday and Sunday	\$ 100.60	\$ 130.80
Double Time- 12:00 Midnight to 6:00 A.M. and recognized holidays.....	\$ 134.20	\$ 174.40

- Show Site prices will apply to all labor orders placed at show site.
- Price is per person/per hour.
- Start time guaranteed only at start of working day.
- One hour minimum per person - labor thereafter is charged in half (1/2) hour increments.
- Labor must be canceled in writing, 24 hours in advance to avoid a one (1) hour cancellation fee per worker.
- When scheduling dismantle labor, be sure to allow sufficient time for empty containers to be returned to your booth.
- Freeman supervised jobs will be completed at our discretion prior to show opening and before the hall must be cleared. **Please include setup plan/photo, special instructions & inbound shipping information with this order.**

INSTALLATION LABOR

Freeman Supervised Labor - Please complete the reverse side of this form.

- Installation of your exhibit will be completed at our discretion prior to show opening.
- The charge for this service is 30% of the total installation labor bill, with a minimum of \$45.00.

Emergency contact: _____ Phone Number: _____

Exhibitor Supervised Labor (Supervisor must check in at Service Desk to pick up labor)

Supervisor will be: _____ Phone Number: _____

Date	Start Time	No. of People	Approx. Hrs. per Person	Total Hrs.	Hourly Rate	Estimated Total Cost
_____	_____	_____ x	_____ =	_____	@ \$ _____ =	\$ _____
_____	_____	_____ x	_____ =	_____	@ \$ _____ =	\$ _____
_____	_____	_____ x	_____ =	_____	@ \$ _____ =	\$ _____
Freeman Supervision (30%/\$45.00)						= \$ _____
Tax						= \$ (N/A)
Total Installation						= \$ _____

DISMANTLE LABOR

Freeman Supervised Labor - Please complete the reverse side of this form.

- Freeman is not responsible for product or literature that is not properly packed and labeled by exhibitor.
- The charge for this service is 30% of the total dismantle labor bill, with a minimum of \$45.00.

Emergency contact: _____ Phone Number: _____

Exhibitor Supervised Labor (Supervisor must check in at Service Desk to pick up labor)

Supervisor will be: _____ Phone Number: _____

Date	Start Time	No. of People	Approx. Hrs. per Person	Total Hrs.	Hourly Rate	Estimated Total Cost
_____	_____	_____ x	_____ =	_____	@ \$ _____ =	\$ _____
_____	_____	_____ x	_____ =	_____	@ \$ _____ =	\$ _____
_____	_____	_____ x	_____ =	_____	@ \$ _____ =	\$ _____
Freeman Supervision (30%/\$45.00)						= \$ _____
Tax						= \$ (N/A)
Total Dismantle						= \$ _____

FREEMAN installation & dismantle

NAME OF SHOW: **ISA EXPO 2009 / 6 - 8 OCTOBER**

COMPANY NAME: _____ BOOTH#: _____

CONTACT NAME: _____ PHONE#: _____

FREEMAN SUPERVISED LABOR

IN ORDER TO BETTER SERVE YOU - PLEASE COMPLETE THE FOLLOWING INFORMATION IF YOUR DISPLAY IS TO BE SET-UP AND/OR DISMANTLED BY FREEMAN I&D AND YOU WILL NOT BE PRESENT TO SUPERVISE THE INSTALLATION AND/OR DISMANTLE.

INBOUND SHIPPING & SET UP INFORMATION

Freight will be shipped to Warehouse _____ Show Site _____ Date Shipped _____

Total No. of: _____ Crates _____ Cartons _____ Fiber Cases _____

Setup Plan/Photo: Attached _____ To Be Sent With Exhibit _____ In Crate No. _____

Carpet: With Exhibit _____ Rented From Freeman _____ Color _____ Size _____

Electrical Placement: Drawing Attached _____ Drawing With Exhibit _____ Electrical Under Carpet _____

Comments: _____

Graphics: With Exhibit _____ Shipped Separately _____

Comments: _____

Special Tools/Hardware Required: _____

OUTBOUND SHIPPING INFORMATION

SHIP TO: _____

METHOD OF SHIPMENT

Freeman Exhibit Transportation:

- Common Carrier
- Air Freight Next Day 2nd Day Deferred Expedited

Other (list carrier name & phone number):

- Other Common Carrier: _____
- Other Air Freight: _____
- Van Line: _____

FREIGHT CHARGES

- Prepaid Collect

Bill To: _____

In the event your selected carrier fails to show on final move-out day, please select one of the following options:

- Reroute via Freeman's choice
- Deliver back to Freeman warehouse at Exhibitor's expense.

PLEASE NOTE: Freeman is not responsible for product or literature that is not properly packed and labeled by exhibitor.