

AUDIOVISUAL EXHIBITOR SERVICES





| NAME OF CONFERENCE: | START DATE: | END DATE: | # EVENT DAYS: | | |
|---------------------|-----------------------|-----------|-----------------|--------|----|
| COMPANY NAME: | ON-SITE CONTACT NAME: | \$1 | ROOM/EXHIBIT BO | OTH #: | |
| STREET ADDRESS: | CITY & STATE : | | ZIP CODE: | | |
| TELEPHONE NUMBER: | DELIVERY DATE | | DELIVERY TIME | АМ | РМ |
| EMAIL ADDRESS: | PICKUP DATE | 9 | PICKUP TIME | АМ | РМ |
| ORDERED BY: | | | | | |

Equipment ordered is a daily rental, Power is a one time charge.

>

If you have any questions or need additional equipment, please call 303-486-4878.

| VIDEO/DATA DISPLAY | Ω ΤΥ | PRICE |
|--|-------------|-------|
| Laptop | | \$245 |
| LCD Projector | | \$480 |
| Blu-Ray Player | | \$140 |
| AUDIO EQUIPMENT | ΩΤΥ | PRICE |
| DI Box (Laptop/ Phone Audio) | | \$65 |
| Wireless Microphone Unit: | | \$195 |
| Individual Small Powered Speaker (up to 5 people) | | \$85 |
| 4-Channel Mixer | | \$70 |
| ACCESSORIES | ΩΤΥ | PRICE |
| Tripod Screens: 6', 7' or 8' | | \$90 |
| Safelock Stand | | \$35 |
| CUSTOM ITEMS | ΩΤΥ | PRICE |
| | | \$ |
| - | | \$ |

MONITORSQTYPRICE32" LCD Monitor (Dual Post Stand,
Table Stand, Speakers)\$26052" LCD Monitor with floor stand\$56570" Monitor (Dual Post Stand,
Table Stand, Speakers)Please contact PSAV for quote
Table Stand, Speakers)

| POWER | ΩΤΥ | PRICE |
|-----------------------------|-----|-------|
| | | |
| 208V Single Phase - 20 AMP | | \$135 |
| 208V Three Phase - 20 AMPs | | \$185 |
| 208V Single Phase - 60 AMPs | | \$290 |
| Additional 25' AC Cable | | \$20 |
| Additional Power Strip | | \$20 |

ORDERING INSTRUCTIONS

To guarantee equipment availability and advanced rate, this order should reach us 21 days prior to delivery.

Operator labor, if requested, is subject to the prevailing hourly rate with a 4 hour minimum. An electronic receipt will be emailed to you.

TAX EXEMPT STATUS – If you are exempt from payment of sales tax, we require you to forward an exemption certificate for the state in which the services are to be provided.

CANCELLATIONS: A) Cancellations received within 48 hours of the scheduled delivery date are subject to a 50% fee applicable to equipment and tax.

B) Cancellations received on the day of scheduled delivery or "no-shows" are subject to the full amount of the order to include installation, drayage and tax.

> Labor, Event Technology Support and Loss Damage Waiver will apply.

SPECIAL REQUESTS Please add any items not listed above that you require

PSAV at Hyatt Regency Denver at Colorado Convention Center 650 15th Street, Denver, CO 80202





Credit Card Consent / Security Deposit Form

Property Name: ______

PLEASE FAX COMPLETED FORMS TO SECURE FAX NUMBER: 303-486-4314

| Credit Card Type: American Express Dis | scover MasterCard Visa | |
|--|------------------------|---|
| Credit Card Number: | | |
| Exp Date: | Security Code | |
| Cardholder's Name: | | |
| (As it appears on credit card) | | |
| Cardholder Billing Address: | Zip Code (REQUIRED): | |
| (Only numeric portion required) | | |
| Cardholder email address: | | - |
| Cardholder's Phone Number: | | - |
| Customer Name: | | - |
| (Name as it should appear on the invoice) | | |
| Invoice/Order Number(s): | Customer PO: | |
| (If a PO # is not provided use loc # and Order ID XXXX XXXX) | | |

| correct to the best of my knowledge. As the cardholde | |
|---|-------------|
| Signature | Date |
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