

EVENT: **Mobile Tech Expo**

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|----------------------------|---|---|
| EXHIBITOR | EXHIBITING COMPANY: _____ | BOOTH #: _____ |
| | PHONE: _____ FAX: _____ | BOOTH SIZE: _____ X _____ |
| | ADDRESS: _____ | BOOTH TYPE: |
| | CITY: _____ STATE: _____ | <input type="checkbox"/> INLINE <input type="checkbox"/> ISLAND |
| | ZIP CODE/PROVIDENCE: _____ COUNTRY: _____ | <input type="checkbox"/> PENINSULA <input type="checkbox"/> OTHER |
| BILLING | BILL-TO COMPANY (IF DIFFERENT): _____ | I AM: |
| | ORDER CONTACT NAME: _____ | <input type="checkbox"/> THE EXHIBITOR |
| | ADDRESS: _____ | <input type="checkbox"/> A 3RD PARTY (EAC/I&D): |
| | CITY: _____ STATE: _____ | |
| | ZIP CODE/PROVIDENCE: _____ COUNTRY: _____ | |
| | PHONE: _____ FAX: _____ | |
| ORDER CONTACT EMAIL: _____ | EMAIL FOR INVOICES: _____ | |

****THIS FORM MUST BE INCLUDED IN YOUR ORDER SUBMISSION OR YOUR ORDER WILL NOT BE PROCESSED****

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| <u>Mobile Tech Expo</u> | <u>Place Your Order Online or Via Email or Fax:</u> | <u>OCCC Mailing Address:</u> |
| Incentive Deadline Date: December 17th, 2018 To qualify for incentive rates, all order forms, this Method of Payment form and a finalized booth diagram must be received by: December 17th, 2018 | Order Online: www.occc.net/exhibitor Email Forms: exhibitor.services@occc.net Send Via Fax: (407) 685-9884 Call: (800) 345-9898 | Orange County Convention Center ATTN: Exhibitor Services 9860 Universal Blvd. Orlando, FL 32819-8199 |

COMPANY CHECK

Checks must accompany your order submission and must be received, not postmarked, by the incentive deadline. Make check payable to Orange County Convention Center. Checks must be US funds drawn from a US bank. Please include your show name and booth number on check.

ELECTRONIC FUNDS TRANSFER

OCCC accepts both wire transfers and ACH payments. Payment must be cleared, not sent, by the incentive deadline. It is the exhibitor's responsibility to verify with their Initiating Bank that all fees are included in their payment. Please contact Exhibitor Services for payment instructions.

***ACH Payments now available Online**

CREDIT / DEBIT CARD

OCCC will charge your credit/debit card in full for your advance order and any additional charges for onsite changes or additions. Please complete all of the information below if using a credit/debit card:

CARD TYPE: VISA MASTERCARD AMERICAN EXPRESS

CARD NUMBER: _____ EXPIRATION DATE: _____ SECURITY CODE: _____

CARDHOLDER NAME: _____

BILLING ADDRESS: _____

I, the undersigned cardholder, by submitting an order to the OCCC, acknowledge and agree to all OCCC Terms & Conditions and give the Orange County Convention Center authorization to charge my credit card for the following services: electricity, rigging labor and equipment, lighting, plumbing, compressed air, propane & natural gas, cable TV and/or firewatches.

SIGNATURE: _____ DATE: _____

I further authorize the following named person(s) to approve additional charges on the above card on show site as deemed necessary by said person(s):

NAME: _____ SIGNATURE: _____

NAME: _____ SIGNATURE: _____

NAME: _____ SIGNATURE: _____