



Mobile Tech Expo

South Point Hotel & Casino - Las Vegas, Nevada

September 6 - 7, 2019

Event Code: L158580919

email lasvegas@shepardes.com

phone (702) 507-5278

fax (702) 948-0341

Discount Deadline Friday, August 16, 2019

Order with complete Payment Authorization must be received before Discount
Deadline date to receive discounted pricing.

Labor Hours

ST - Straight time: Monday - Friday: 8:00 am - 4:30 pm

OT - Overtime: Monday - Friday: 4:30 pm - Midnight: Saturday/Sunday: 8:00 am - 5:00 pm

DT - Double-time: All other hours and Holidays

Shepard Blue Supervised Install Labor

Code	Discount	Regular	Estimate
68066 ST	\$143.98	\$187.15	
68067 OT	\$215.96	\$280.75	
68068 DT	\$287.95	\$374.35	

Shepard Blue Supervised Dismantle Labor

Code	Discount	Regular	Estimate
68070 ST	\$143.98	\$187.15	
68071 OT	\$215.96	\$280.75	
68072 DT	\$287.95	\$374.35	

Booth Size: _____ X _____

**Pricing includes Supervisory fee of 30% over standard labor .

Step One:

Choose Your **Service**

- Installation
- Dismantling
- Both

Step Two:

How Many **People?**

- # _____
- # _____
- # _____

Step Three:

How Many **Hours?**

- # _____
- # _____
- # _____

Step Four:

When Should the Build be **Complete?**

- Date: _____ Time: _____
- Date: _____ Time: _____
- Date: _____ Time: _____

Step Five: Tell Us About Your **Exhibit!** (this portion **must be completed** before Shepard can begin any work on your exhibit)

Inbound Freight Advance Warehouse Direct to Show site

Carrier Name _____ Tracking or Pro # _____

Estimated Arrival Date _____ # of Pieces _____ Estimated Weight _____

Set Up Information:

Company Contact Name: _____

Email _____

Cell Phone # _____

Drawings/Photos/Instructions:

- Attached
- Emailed to Shepard
- With the Exhibit
- In crate # _____

Graphics:

- With Exhibit
- Shipped Separately

Electrical Placement
(exhibitor is responsible to order)

- Emailed to Shepard
- Drawing Attached
- Drawing with Exhibit
- Run under carpet

Other Services Ordered:

- Overhead Rigging
- Cleaning
- AV

Carpet:

- Ordered from Shepard
- Exhibitor Owned Carpet
- Carpet Padding

Outbound Shipping:

- # of Crates _____
- # of Cartons _____
- # of Fiber Cases _____
- # of Pallets _____

Method:

- Ground
- 2-Day Air
- Next Day Air
- Other

Phone # _____

Must Arrive at Destination By: _____

Name of Carrier _____

Date Carrier is Scheduled to Pick Up Freight _____

- If Your Carrier doesn't show? Reroute with SLS
- Send to advance warehouse for pick up (\$400 minimum charge)

*Allow time for empty return when scheduling your pick up

Hours are based on estimates. You will be invoiced for actual time incurred. Minimum one hour per person ordered and half increments thereafter.

Orders cancelled without 48-hour written notice will be charged a one (1) hour cancellation fee.

Company Name: _____

Estimated **SES Blue Labor:** \$ _____

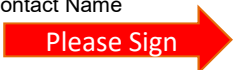
NA Tax*: \$ _____

Amount Due: \$ _____

Booth # _____

Contact Name _____

Contact Email Address _____



Card Holder Signature



Exhibitor Supervised Labor

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DT - Double-time: All other hours and Holidays

Exhibitors may not operate any type of mechanical or powered equipment.

Exhibitor Supervised Install Labor

Code		Discount	Regular	Estimate
68060	ST	\$110.75	\$144.00	
68061	OT	\$166.13	\$215.95	
68062	DT	\$221.50	\$287.95	

Exhibitor Supervised Dismantle Labor

Code		Discount	Regular	Estimate
68063	ST	\$110.75	\$144.00	
68064	OT	\$166.13	\$215.95	
68065	DT	\$221.50	\$287.95	

Step One:

Choose your service

- Installation
- Dismantling
- Both

Step Two:

How many people?

- # _____
- # _____
- # _____

Step Three:

How many hours?

- # _____
- # _____
- # _____

Step Four:

Carpet:

- Ordered from Shepard
- Exhibitor Owned Carpet
- Carpet Padding

Step Five:

Any other details?

Any special tools needed? Ladders? Lifts?

- Ladders
- Lifts
- Special Tools: _____

Details: _____

Step Six: Schedule

	Date	Start Time	End Time
Installation Request			
Dismantle Request			

Requested times are not guaranteed and are based on availability.

Step Seven: Onsite Contact Info

Name: _____

Cell: _____

Email: _____

Hours are based on estimates. You will be invoiced for actual time incurred. Minimum one hour per person ordered and half increments thereafter.

Orders cancelled without 48-hour written notice will be charged a one (1) hour cancellation fee.

Company Name: _____

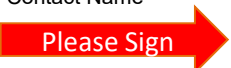
Labor Estimate \$ _____

NA Tax*: \$ _____

Amount Due: \$ _____

Booth # _____

Contact Name _____ Contact Email Address _____



Card Holder Signature