



EAC/Third Party Billing

Please Mail or Fax Completed Form to: AEX Convention Services
 3089 English Creek Ave., Egg Harbor Township, NJ 08234
 Fax: (609) 272-1680 • Phone: (609) 272-1600
 www.aexservices.com

Show Name: **MID ATLANTIC HARDSCAPING TRADE SHOW 2012**

Show Dates: **FEBRUARY 7-8, 2012**

Deadline Date To Receive Discounted Rates: JANUARY 30, 2012

To: AEX Services

Please be advised that we will be using an independent contractor of our own choosing to perform installation/dismantle labor services at the Atlantic City Convention Center. We are aware that a responsible representative of our contractor must report to the AEX Service Desk on the first day of set-up. No badges will be issued until all pertinent paperwork is in order.

Third Party/Display House:

Address: _____
 City : _____ State: _____ Zip: _____
 Contact: _____
 Phone Number: _____ Booth Number: _____
 Your Name: _____ Your Signature: _____
 Date: _____

Display house must also provide a Certificate of Insurance to AEX

	Exhibitor will pay	Third Party will pay	
Furniture	<input type="radio"/>	<input type="radio"/>	\$ _____
Carpet	<input type="radio"/>	<input type="radio"/>	\$ _____
Labor	<input type="radio"/>	<input type="radio"/>	\$ _____
Cleaning	<input type="radio"/>	<input type="radio"/>	\$ _____
Freight	<input type="radio"/>	<input type="radio"/>	\$ _____
Utilities	<input type="radio"/>	<input type="radio"/>	\$ _____
Other Services	<input type="radio"/>	<input type="radio"/>	\$ _____



Acceptance of this third party billing is contingent upon:

An Authorization Form, the Insurance Form and return of the notification letter prior to the deadline date.

Company Name: _____ **Booth#:** _____