

EXHIBIT SALES FLOOR CONTRACT - PAGE TWO

Please complete (print clearly) and return both copies. If you are accepted, we will return a signed copy.

Company Name _____ Product _____

Contact Person _____ Phone/Cell _____

Address _____ City _____ State _____

Zip _____ (+4) _____ Country _____ Fax _____

Email _____ Website _____

Booth Name [grid]

City: [grid] St: [grid]

If possible, I would like my booth next to or near _____

I/We hereby agree to abide by this contract _____
Signature Title Date

After completing the contract, please check the appropriate choice below and send the required deposit or full amount (US funds only), to the address on the top of page one.

- 1 single inside booth (\$500.00) deposit due now \$250.00
1 single corner booth (\$550.00) deposit due now \$275.00
2 inside booths (\$980.00) deposit due now \$490.00
1 inside and 1 corner booth (\$1030.00) deposit due now \$515.00
3 inside booths (\$1460.00) deposit due now \$730.00
2 inside and 1 corner booth (\$1510.00) deposit due now \$755.00
4 inside booths (\$1940.00) deposit due now \$970.00
2 inside booths and 2 corner booths (\$2040.00) deposit due now \$1020.00

You may pay by check or credit card. Checks are payable to Heart of Ohio Tole Chapter, Inc. There will be a \$35.00 charge on all returned checks.

If paying by credit card please fill out the information below.

Name as it appears on the credit card _____

Billing address _____

City _____ ST _____ Zip _____

Phone # (day) _____ (night) _____

Total amount paid _____

Credit Card # _____ Exp. Date _____ 3 Digit Code _____
Master Card Visa Discover

Office Use Only
Total Due \$ _____
Date _____ Deposit Amt \$ _____
Date _____ Payment \$ _____
Late Fee \$ _____
Date _____ Final Payment \$ _____
Total Amount Paid \$ _____
Booth Number _____

Contact Heart of Ohio Tole Chapter, Inc.,
If you have any questions.
Phone 614-863-1785 Fax 614-864-9335

PLEASE RETURN BOTH PAGES