F R E E M A N 940 Belfast Road

Ottawa, Ontario K1G 4A2 (613) 748-7180 • Fax: (613) 748-5977



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- online ordering service at: www.freemanco.com/store.
- . Orders received without payment or after the deadline date will be charged at the standard price.
- Copies of invoices may be picked up from the Service Desk prior to show closing.
- . If you have questions or need assistance with any items not listed, please call and ask for your Exhibitor Sales Representative.

FREEMAN 940 Belfast Road Ottawa, Ontario K1G 4A2

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ALL PRICES ARE IN CANADIAN DOLLARS

OTTAWA HOME & REMODELLING SHOW NAME OF SHOW:

In order to authorize Freeman to invoice a third party for payment of services rendered to exhibitors, both the exhibiting company and the third party must complete this form and return it at least 14 days prior to show move-in.

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"We understand and agree that we, the exhibiting company, are ultimately responsible for payment of charges and agree by submitting this form or ordering materials or services from Freeman, to be bound by all terms and conditions as described in the Terms & Conditions section of this services manual. In the event that the named third party does not discharge payment of the invoice prior to the last day of the show, charges will revert back to the exhibiting company. All invoices are due and payable upon receipt, by either party. The items checked below are to be invoiced to the third party.

BY SUBMITTING THIS FORM VIA FAX, POSTAL MAIL OR ORDERING MATERIALS OR SERVICES FROM FREEMAN, YOU AGREE TO BE BOUND BY ALL TERMS AND CONDITIONS INCLUDED IN YOUR SERVICE MANUAL. The undersigned expressly consents to the digital processing and transmission of personal data which may be transmitted to the United States of America. EXHIBITOR NAME: (PLEASE PRINT) **EXHIBITOR SIGNATURE:** DATE: **EXHIBITING COMPANY INFORMATION EXHIBITING COMPANY NAME:** BOOTH # EXHIBITING COMPANY ADDRESS: CITY/PROVINCE/POSTAL CODE: EXT. PHONE: FAX: CONTACT'S E-MAIL: Indicate which services are to be invoiced to the Third Party: **ALL FREEMAN SERVICES** FREEMAN TRANSPORTATION & CUSTOMS I&D LABOUR/SUPERVISION RENTAL FURNITURE/CARPET/SIGNS **MATERIAL HANDLING/IN & OUT** FREEMAN ELECTRICAL OTHER THIRD PARTY COMPANY INFORMATION THIRD PARTY COMPANY NAME: CONTACT NAME: THIRD PARTY ADDRESS: CITY/STATE/ZIP: EXT. FAX: PHONE: CONTACT'S E-MAIL: E-MAIL FOR INVOICE: Invoices will be sent by e-mail. Please provide the e-mail address of the person who reconciles your invoices if different than contact's email. THIRD PARTY CREDIT CARD AUTHORIZATION AMERICAN EXPRESS MASTERCARD VISA WE DO NOT ACCEPT CREDIT CARD INFORMATION BY EMAIL. CREDIT CARD ACCOUNT NO: EXP. DATE: CARDHOLDER NAME (PLEASE PRINT): CARD TYPE: AUTHORIZED SIGNATURE CARDHOLDER BILLING ADDRESS: CITY/PROVINCE/POSTAL CODE

JULY 2016 (431503)