



Wisconsin Expo, Inc.
1076 Western Drive
Hartford, WI 53027
Phone:(262) 670-1300 Fax:(262) 670-1360

Dear Exhibitor:

Welcome to Milwaukee and the **2008 AOA Expo and Conference**. Your show will be held **June 1-3, 2008** at the Clarion Hotel Milwaukee Airport. We are pleased that Wisconsin Expo, Inc. has been selected as your official service contractor. Our goal is to help make sure your show participation is a success.

Each "Inside" 8'x 10' or 8'x8' booth space will be provided with the following:

- 8' high background drapes and 3' high siderails
- Drape colors: black and silver
- 1 - 2'x 8'x 30" high skirted table (6' table for 8'x8' booths)
- 2 - chairs
- 1 - wastebasket
- 1 - 7"x44" one line booth identification sign

NOTE: The exhibit floor is carpeted. For your added comfort & professional appearance, please see the enclosed form to order carpet and/or padding.

Enclosed are our order forms describing other services that we can provide. Services include: **additional 4',6', 8'tables or 42"counter height tables, carpet, chairs, stools, easels, wastebaskets, shipping/freight handling, in-booth forklift labor, electrical service, display installation/dismantle labor, self-standing display panels, booth cleaning and silk plants or trees.**

Please note:Take advantage of our substantial price discounts! Just return your order, with payment, by May 19, 2008 and use the "ADVANCE ORDER" price. Sorry, there are no substitutions for the provided equipment listed above.

If there are any other services not listed or questions you may have, please feel free to give us a call. We are here to assist you in any way we can.

Sincerely,
Mark Everts

Wisconsin Expo, Inc.



Wisconsin Expo, Inc.
 1076 Western Drive
 Hartford, WI 53027

Phone:(262) 670-1300 Fax:(262) 670-1360

AMOUNT	WOOD DISPLAY TABLES	ADVANCE ORDER (BY 5/19/08)	FLOOR ORDER (AFTER 5/19/08)	TOTAL
_____	2'x 4'x 30" high not skirted	\$ 30.00	\$ 40.00	_____
_____	2'x 4'x 30" high skirted	\$ 69.00	\$ 79.00	_____
_____	2'x 6'x 30" high not skirted	\$ 30.00	\$ 40.00	_____
_____	2'x 6'x 30" high skirted	\$ 75.00	\$ 85.00	_____
_____	2'x 8'x 30" high not skirted	\$ 30.00	\$ 40.00	_____
_____	2'x 8'x 30" high skirted	\$ 80.00	\$ 90.00	_____
_____	2 1/2'x 8'x 30" high not skirted	\$ 35.00	\$ 45.00	_____
_____	2 1/2'x 8'x 30" high skirted	\$ 85.00	\$ 95.00	_____

RAISED TABLES (42" HIGH)

_____	2'x 4'x 42" high not skirted	\$ 38.00	\$ 48.00	_____
_____	2'x 4'x 42" high skirted	\$ 79.00	\$ 89.00	_____
_____	2'x 6'x 42" high not skirted	\$ 38.00	\$ 48.00	_____
_____	2'x 6'x 42" high skirted	\$ 85.00	\$ 95.00	_____
_____	2'x 8'x 42" high not skirted	\$ 38.00	\$ 48.00	_____
_____	2'x 8'x 42" high skirted	\$ 90.00	\$ 99.00	_____

COLORS: ___ WHITE ___ BLUE ___ RED ___ BLACK ___ GREEN ___ GOLD ___ TEAL ___ BURGUNDY ___ SILVER ___ SHOW COLORS

CHAIRS

_____	Folding Chairs	\$ 12.00	\$ 18.00	_____
_____	Armchairs	\$ 26.00	\$ 36.00	_____
_____	Fiberglass side chairs	\$ 20.00	\$ 30.00	_____
_____	High stools	\$ 30.00	\$ 40.00	_____

CARPETING

_____	9'x 10'	\$ 88.00	\$ 99.00	_____
_____	9'x 20'	\$175.00	\$199.00	_____
_____	9'x 30'	\$264.00	\$299.00	_____
_____	Special size (per square foot)	\$ 1.35/sq.ft.	\$ 1.60/sq.ft.	_____
_____	Carpet padding (per square foot)	\$.65/sq.ft.	\$.85/sq.ft.	_____
_____	Visqueen covering (per square foot)	\$.40/sq.ft.	\$.60/sq.ft.	_____

CARPETING COLORS: ___ BLUE ___ GREY ___ TEAL ___ BLACK ___ RED ___ BURGUNDY

MISCELLANEOUS

_____	VCR/TV combo	\$165.00	N/A	_____
_____	Refrigerator, 4 cubic feet	\$ 75.00	N/A	_____
_____	Chrome sign holder (22"x28")	\$ 30.00	N/A	_____
_____	Wastebasket	\$ 9.00	\$ 12.00	_____
_____	Floor standing easel	\$ 18.00	\$ 25.00	_____
_____	24" round or square pedestal table(circle one)	\$ 30.00	\$ 40.00	_____
_____	36" round pedestal table	\$ 35.00	\$ 45.00	_____
_____	___ 18"high ___ 30"high ___ 40"high			_____

EXHIBITION: **AOA Expo & Conference June 1-3, 2008**

SUBTOTAL: _____

COMPANY NAME: _____

SALES TAX 5.6 %: _____

ADDRESS: _____

TOTAL: _____

CITY/ STATE/ ZIP: _____

DATE: _____

ORDERED BY: _____ SIGNATURE: _____

PHONE: _____ FAX: _____ BOOTH #: _____

PLEASE REMIT PAYMENT WITH ORDER. ALL CHARGES MUST BE PAID BEFORE THE SHOW.

email: wiexpo@aol.com

visit us at www.wisconsinexpo.com



Wisconsin Expo, Inc.
 1076 Western Drive
 Hartford, WI 53027
 Phone:(262) 670-1300 Fax:(262) 670-1360

BOOTH INSTALLATION/DISMANTLE LABOR
Service order form due: May 22, 2007

**All labor will be assigned as close to the requested time as possible.
 To guarantee labor, it must be ordered in advance.**

**Our labor rates: Straight Time between 8:00AM & 4:30PM weekdays.
 Overtime before 8:00AM & after 4:30PM weekdays,
 and all day Saturdays, Sundays and holidays.**

	S.T.	O.T.
Under <u>your</u> supervision with a one hour minimum:	\$60.00/hour	\$80.00/hour
Under <u>WI Expo's</u> supervision with a one hour minimum:	\$65.00/hour	\$85.00/hour

***These are advance order prices. Orders placed on the show floor may be subject to a \$5.00/hour surcharge.**

of laborers: Date: Time: Total # of hours:

Labor to set up display:

Labor to take down display:

***Calculation: Total # of hours: _____ x's applicable rate \$ _____ = total due \$ _____**

Exhibition: AOA Expo & Conference June 1-3, 2008

Company Name: _____ Booth #: _____

Address: _____

City: _____ State/Zip: _____

Ordered By: _____ Signature: _____

Phone: _____ Fax: _____ Date: _____

PLEASE REMIT PAYMENT WITH YOUR ORDER. THANK YOU!

email: wiexpo@aol.com

visit us at www.wisconsinexpo.com



Wisconsin Expo, Inc.
 1076 Western Drive
 Hartford, WI 53027
 Phone:(262) 670-1300 Fax:(262) 670-1360

AOA Expo and Conference
June 1-3, 2008
Clarion Hotel Milwaukee Airport
Milwaukee, Wisconsin

In Booth Forklift/Labor Service Form

ADVANCED ORDER DEADLINE DATE:
May 19, 2008

Forklift/Labor Services:(booth work only-not to be used for unloading/loading of freight at docks)

Exhibitors requiring forklift(s) to assemble display or when uncrating, unskidding, positioning and reskidding equipment will need to estimate their needs below. A forklift is required for moving equipment or materials weighing 200 lbs or more. Your forklift order consists of a 5,000 lb. forklift with operator. A rigger will be assigned if uncrating, unskidding and reskidding is involved. Riggers can be ordered independently, without the use of a forklift.

Forklift/Labor Rates:

The minimum charge for labor and equipment is one (1) hour per forklift and/or rigger. Equipment and labor thereafter is charged in half (1/2) hour increments. Order cancellations must be made **24 hours in advance** or a **1 hour fee** per forklift and rigger ordered will be charged. If exhibitor fails to use riggers and equipment, at the time confirmed, a one hour "no show" charge per rigger and/or forklift will apply.

Hourly Rates	Description	Forklift w/Operator	Rigger
Straight Time	Between 8:00 AM – 4:30 PM Weekdays	\$ 90.00	\$60.00
Overtime	Before 8:00 AM and after 4:30 PM Weekdays and all day Weekends and Holidays	\$130.00	\$80.00

NOTE: If equipment is to exceed 5,000 lbs, WI Expo, Inc. must be informed by May 5, 2008 to give ample time to ensure the proper forklift is onsite to handle the equipment being moved.

Company Name: _____ Booth Number: _____
 Address: _____ City/State/Zip: _____
 Phone Number: _____ Fax Number: _____
 Ordered By: _____ Signature: _____ Date: _____

	Date	Start Time	# of Hrs.	# of Forklifts	# of Riggers
Installation					
Dismantling					

Describe work to be done:

CALCULATION:

	Straight Time Hrs.	Cost	Overtime Hrs.	Cost
Forklift w/operator	X \$90.00 =		X \$130.00 =	
Rigger	X \$60.00 =		X \$ 80.00 =	

Total Cost: \$ _____



Wisconsin Expo, Inc.
1076 Western Drive
Hartford, WI 53027
Phone:(262) 670-1300 Fax:(262) 670-1360

ELECTRICAL SERVICE
Service Order Form due: May 19, 2008

Quantity	Service	Advance	Floor	Total
_____	500 watt A-C outlet, 110 volts	\$ 52.00	\$ 65.00	_____
_____	1000 watt A-C outlet, 110 volts	\$ 85.00	\$ 95.00	_____
_____	1500 watt A-C outlet, 110 volts	\$ 92.00	\$115.00	_____
_____	2000 watt A-C outlet, 110 volts	\$108.00	\$123.00	_____
_____	150 watt spotlight (be sure to order electrical service)	\$ 25.00	\$ 35.00	_____
_____	Extension cord (be sure to order electrical service)	\$ 15.00	\$ 25.00	_____
_____	Power strip (be sure to order electrical service)	\$ 15.00	\$ 25.00	_____

All electrical orders must be received 10 days in advance. Wall outlets are not to be used by the exhibitor and are not part of the booth space. All orders are subject to availability of power on site. Charges include installation and removal. All equipment is provided on a rental-only basis.

Please call for quote on special requirements and/or hook ups

Exhibition: **AOA Expo & Conference** **June 1-3, 2008**

Company Name: _____ Subtotal \$ _____

Address: _____ Sales Tax 5.6% \$ _____

City/State/Zip _____ Total \$ _____

Ordered by: _____ Signature: _____ Date: _____

Phone: _____ Fax: _____ Booth No: _____

PLEASE REMIT PAYMENT WITH YOUR ORDER. THANK YOU!

email: wixpo@aol.com

visit us at www.wisconsinexpo.com



Wisconsin Expo, Inc.
 1076 Western Drive
 Hartford, WI 53027
 Phone:(262) 670-1300 Fax:(262) 670-1360

RENTAL DISPLAY UNITS
SELF-STANDING MODULAR PANELS
Service order form due: May 19, 2008

ADVANCE PRICE ONLY

- _____ 1 METER SELF STANDING VELCRO PANEL \$ 99.00 each
 BLUE_____ BLACK_____
- *INSTALL VERTICAL_____ HORIZONTAL_____
- _____ 4'x 8' SELF STANDING VELCRO PANEL \$ 99.00 each
 GRAY_____ BLACK_____
- *INSTALL VERTICAL_____ HORIZONTAL_____
- _____ 1/2 METER SELF STANDING VELCRO PANEL(BLACK) \$ 60.00 each
 *INSTALL VERTICAL_____ HORIZONTAL_____
- _____ 4'x 8' SELF STANDING TACKBOARD (GRAY) \$ 99.00 each
 *INSTALL VERTICAL_____ HORIZONTAL_____
- _____ 2'x 6' SELF STANDING GRID WALL PANEL (BLACK) \$ 99.00 each
 *INSTALL VERTICAL_____ please call for available accessories
- _____ 4'x 8' SELF STANDING PEGBOARD(GRAY-1/4"HOLES) \$ 99.00 each
 *INSTALL VERTICAL_____ HORIZONTAL_____
- _____ FLAT SHELVES (WHITE-USED W/VERTICAL PANELS) \$ 26.00 each
- _____ ANGLE SHELVES (WHITE-USED W/VERTICAL PANELS) \$ 30.00 each
- _____ DISPLAY LIGHTS (electrical hook up not included) \$ 25.00 each

EXHIBITION: AOA Expo & Conference June 1-3, 2008

SUBTOTAL \$ _____

COMPANY NAME: _____

SALES TAX 5.6% \$ _____

ADDRESS: _____

TOTAL \$ _____

CITY/STATE/ZIP: _____

DATE: _____

ORDERED BY: _____ SIGNATURE: _____

PHONE: _____ FAX: _____ BOOTH #: _____

PLEASE REMIT PAYMENT WITH YOUR ORDER. THANK YOU!



Wisconsin Expo, Inc.
1076 Western Drive
Hartford, WI 53027
Phone:(262) 670-1300 Fax:(262) 670-1360

CLEANING ORDER FORM

BOOTH VACUUMING CAN BE DONE DAILY OR ONE TIME BEFORE SHOW OPENS. TO ENSURE YOUR BOOTH IS SHOW-READY, PLEASE SPECIFY YOUR REQUIREMENTS BELOW. COST OF VACUUMING IS DETERMINED BY THE TOTAL SQUARE FOOTAGE OF YOUR BOOTH SPACE.

BOOTH SIZE ____ FT. X ____ FT. = ____ SQ. FT. X \$ 0.20 = _____ PER DAY

PER DAY PRICE \$ _____ X _____ NO. OF DAYS = \$ _____ TOTAL DUE

SILK PLANT/TREE ORDER FORM

	ADVANCE ORDER ONLY	TOTAL
____ TABLE SIZE PLANT (GREEN)	\$ 15.00	_____
____ 3' TALL PLANT ARRANGEMENT (GREEN)	\$ 30.00	_____
____ 5' TALL TREE	\$ 45.00	_____
____ 6' TALL TREE	\$ 50.00	_____

EXHIBITION: AOA Expo & Conference June 1-3, 2008

COMPANY NAME: _____ SUBTOTAL \$ _____

ADDRESS: _____ SALES TAX 5.6 % \$ _____

CITY/STATE/ZIP: _____ TOTAL \$ _____

ORDERED BY: _____ SIGNATURE: _____ DATE: _____

PHONE: _____ FAX: _____ BOOTH #: _____

PLEASE REMIT PAYMENT WITH YOUR ORDER. THANK YOU!

email: wiexpo@aol.com

visit us at www.wisconsinexpo.com



Wisconsin Expo, Inc.
1076 Western Drive
Hartford, WI 53027
Phone:(262) 670-1300 Fax:(262) 670-1360

Dear Exhibitor,

To guarantee the services you desire, please fax your order along with the credit card information listed below. To keep expenses manageable, for all parties concerned, we prefer payment by company check. Please indicate your intentions below:

yes, we will be mailing a check, along with order(s), to arrive before the first day of show set up. Please do not process the credit card information listed below.
 no, we prefer to pay for the indicated services with the credit card information provided.

CREDIT CARD CHARGE AUTHORIZATION

 American Express MasterCard Visa

Account # _____ Expiration Date __ / __

Cardholder's Signature: _____

Cardholder's Name(Print): _____

Company Name: _____ Booth #: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____ Fax number: _____

Exhibition: AOA Expo & Conference
June 1-3, 2008
Clarion Hotel – Milwaukee Airport