FREEMAN[®] 940 Belfast Road Ottawa, Ontario K1G 4A2 (613) 748-7180 • Fax: (613) 748-5977

INCLUDE THE FREEMAN METHOD OF PAYMENT FORM WITH YOUR ORDER

	SHOW:	•••••		EMODELLIN	• • • • • • •			
OMPANY	NAME		BOOTH #:					
ONTACT I	NAME:				PHONE #:			
	DRESS							
or Assista	ance, please	call 613-748-7180 to s	•					
			or fast, easy ordering,					
escription		DISPLAY L	ABOUR (One H	lour Minimum p		dvance	d Show Site	
escription					A	uvance	a Show Site	
traight Tin vertime-	6:00	A.M. to 4:00 P.M. Monday A.M. to 8:00 A.M. and 4:0 A.M. to 12:00 Midnight Sa	0 P.M. to 12:00 Midnigh	nt Monday through Frid	ay		91.00 136.50	
ouble Tim) Midnight to 6:00 A.M. ar					182.00	
• One • Labo • Whe • Free clear • Inst • The Emerge	e hour minimu our must be c en scheduling eman supervi- red. <u>Please i</u> eman Supervi- tallation of yo e charge for t ency contact:	check in at the Service im per person - labour cancelled in writing, 24 dismantle labour, be sed jobs will be compl nclude setup plan/pl ised Labour - Please of his service is 30% of the vised Labour (Superv	thereafter is charge hours in advance to sure to allow sufficie eted at our discretion noto, special instruc- INSTALLATIC complete page 2 of thi pleted at our discretion he total installation la	d in half (1/2) hour ir o avoid a one (1) hou nt time for empty co n prior to show open ctions & inbound s DN LABOUR s form. on prior to show ope abour bill, with a min Phone Numbo	Ir cancellation f Intainers to be r Ing and before hipping inforn ning. imum of \$45.00 er:	eturned the hall nation	I to your booth. I must be with this order.	
				Phone Number	er:			
Date	Start Time	No. of People	Approx. Hrs. per Person =	Total Hrs. @ \$.	Hourly Rate	= \$	Estimated Total Cost	
		x	=	@\$		= \$		
		x						
		^						
			Fr	eeman Supervision				
				Total	Installation	=\$		
			DISMANTLE	E LABOUR				
• Fil • Th Emerge	reeman is no he charge for ency contact:	vised Labour - Please t responsible for produ- this service is 30% of 	uct or literature that is the total dismantle l	s not properly packe abour bill, with a mir Phone Numb	imum of \$45.00 er:	D.		
Superviso	or will be:			Phone Numb	er:			
Date	Start Time		Approx. Hrs. per Person =				Estimated Total Cost	
		>						
		>						
)	、 =	(2) \$		- D		
				man Supervision (30		= \$		
						= \$ = \$		

OTTAWA HOME & REMODELLING SHOW

BOOTH#:

PHONE#:

COMPANY NAME:

NAME OF SHOW:

FREEMAN SUPERVISED LABOUR

<u>IN ORDER TO BETTER SERVE YOU</u> - PLEASE COMPLETE THE FOLLOWING INFORMATION IF YOUR DISPLAY IS TO BE SET-UPAND/OR DISMANTLED BY FREEMAN I&D AND YOU WILL NOT BE PRESENT TO SUPERVISE THE INSTALLATION AND/OR DISMANTLE.

	INBOUND SHIPPING	& SET UP INFOR	MATION	
reight will be shipped to W	arehouse Show S	Site Date Shipp	_ Date Shipped	
otal No. of:	Crates	Cartons _		Fiber Cases
etup Plan/Photo: Attached	t To Be Sent V	Vith Exhibit	In Crate No	
arpet: With Exhibit	Rented From Freem	nan Color	Size	
lectrical Placement:	Drawing Attack	nedDrawing With ExhibitEle	ectrical Under Carpet	
Comments:				
	Shipped Separat			
Comments:				
HIP TO: METHOD OF SHIPMENT T Freeman Exhibit Tran		PPING INFORMAT		
Common CarrierAir Freight	■ Next Day ■ 2nd D	ay Deferred	Expedited	
Other Air Freight: Van Line: REIGHT CHARGES	arrier:			
ollowing options:	Collect	ow on final move-out	day. please selec	t one of the
	to Freeman warehouse a	at Exhibitor's expens	Se.	

PLEASE NOTE: Freeman is not responsible for product or literature that is not properly packed and labeled by exhibitor.