

**EXHIBITOR AUDIO VISUAL RENTAL ORDER FORM**

**Natural Products Expo East**  
**September 23-26, 2009**  
 Boston Convention Center  
 Boston, Massachusetts



If you have a special request or need additional equipment, please call.

Video Equipment	Qty	DAY RATE		Days Used	Total	Return for Processing
		Advanced	On Site			
1/2" VHS Player with "Auto Repeat"		\$70.00	\$87.50			<b>PSAV Event Services</b> Los Angeles  Attention Kevin Baker  16320 Arthur Street Cerritos, CA 90703  <a href="mailto:kbaker@psav.com">kbaker@psav.com</a> (562) 916-4000 EXT224 (Phone) (562) 916-4010 (Fax)
1/2" S-VHS Player		\$125.00	\$156.25			
1/2" World Deck NTSC/PAL/SECAM		\$150.00	\$187.50			
Betacam SP Deck Player/Recorder		\$350.00	\$437.50			
DVD Player		\$75.00	\$93.75			
18" LCD Video Monitor (NOT for computer use)		\$175.00	\$218.75			
24" LCD Video Monitor (NOT for computer use)		\$225.00	\$281.25			
32" LCD Video Monitor (NOT for computer use)		\$275.00	\$343.75			
20" TV-DVD Combo Unit		\$150.00	\$187.50			
27" Color Video Monitor (NOT for computer use)		\$150.00	\$187.50			
30" AV Cart w/skirt		\$20.00	\$25.00			
42" AV Cart w/skirt		\$22.00	\$27.50			
54" AV Cart w/skirt		\$24.00	\$30.00			

Audio Equipment	Qty	DAY RATE		Days Used	Total	Ordering Instructions
		Advanced	On Site			
Cassette Player		\$40.00	\$50.00			The total charge per item is determined by multiplying the quantity by the daily rate by the number of days to be used.  On-Site Daily Rate - Rate takes effect 10 business days before the opening day of the show.  TAX EXEMPT STATUS - If you are exempt from payment of sales tax, we require you to forward an exemption certificate for the state of California along with this order form. To guarantee equipment availability, this order should reach us <b>15 days prior</b> to delivery.  Labor - Operator labor, if requested, is subject to the prevailing hourly rate at a 5 hour minimum.  CANCELLATIONS: A) Cancellation of equipment ordered must be received <b>48 hours prior</b> to delivery date to avoid a minimum one day charge. B) If services have already been provided at the time of cancellation, <b>50% of original charges</b> will be applied.
CD Player		\$50.00	\$62.50			
Wired Microphone: Handheld or Lavalier (circle one)		\$25.00	\$31.25			
Wireless Microphone: Handheld or Lavalier (circle one)		\$125.00	\$156.25			
Wireless Headset: (Needs wireless Lavalier)		\$15.00	\$18.75			
Powered Speaker with stand		\$50.00	\$62.50			
Sound System with (2) powered speakers, (2) stands and (1) "Wired" Microphone: Handheld or Lavalier (circle one)		\$125.00	\$156.25			
Sound System with (2) powered speakers, (2) stands and (1) "Wireless" Microphone: Handheld or Lavalier (circle one)		\$250.00	\$312.50			

Computer Display Equipment	Qty	DAY RATE		Days Used	Total
		Advanced	On Site		
15" Flat Screen Monitor		\$100.00	\$125.00		
17" Flat Screen Monitor		\$125.00	\$156.25		
19" Flat Screen Monitor		\$150.00	\$187.50		
42" Plasma Monitors w/ Chrome Dual Pole Plasma Stand		\$650.00	\$812.50		
50" Plasma Monitors w/ Chrome Dual Pole Plasma Stand		\$750.00	\$937.50		
LCD Projector (XGA, 1024x768 Resolution) w/cart		\$650.00	\$812.50		
Laptop (Pentium M Processors)		\$200.00	\$250.00		

Presentation Accessories	Qty	DAY RATE		Days Used	Total
		Advanced	On Site		
Overhead Projector Package (include:overhead, & cart)		\$50.00	\$62.50		
Flipchart Easel w/ pad & pens		\$35.00	\$43.75		
Poster Easels		\$15.00	\$18.75		

**Customer Information**

<b>EQUIPMENT TOTAL</b>	1	Company Name:
<b>SALES TAX (5.00% of line 1)</b>	2	
<b>DELIVERY/SETUP/PICKUP (22% of line 1 or \$100.00 minimum)</b>	3	Address:
<b>TOTAL DUE</b>	4	City:

Method of Payment	PLEASE CHECK ONE		State:	Zip:	
Card Number: _____ Exp Date __ / __	AMEX	<input type="checkbox"/>	Ordered By:	Phone #:	
Cardholder's Name (as appears on card): _____	Visa	<input type="checkbox"/>			Fax #:
Cardholders Signature: * _____	MasterCard	<input type="checkbox"/>			
	Check	<input type="checkbox"/>			

Delivery Information		On-Site Contact:
Delivery Date:	Delivery Time:	Cell Phone / Pager #:
Show Start Date:	Show Start Time:	Hall / Building Name:
Pick-Up Date:	Pick-Up Time:	Room / Booth #:

**A CONFIRMATION OF YOUR ORDER WILL BE SENT VIA FAX / E-MAILED ONCE YOUR ORDER HAS BEEN CONFIRMED WITH US.**