Domestic Third Party Billing Request

All orders are governed by the GES Payment Policy and GES Terms & Conditions of Contract as specified in this Exhibitor Services Manual.

MAGIC-FN PLATFORM | WWDMAGIC | SOURCING AT MAGIC | FOOTWEAR SOURCING AT MAGIC Las Vegas Convention Center August 11 - 14, 2019 Form Deadline Date: July 31, 2019

Company Name Email Phone Number Booth Number

Return this form when a Third Party (any party other than exhibiting company) ("AGENT") should be billed for services.

Step 1. Provide the Exhibiting Company contact information and signature

Exhibiting Company Address City				State	Zip/Country
Phone	Fax	Contact's Email Address			
Please Sign	x		0	ee in placing this order	
olgn	Exhibiting Company Authorized Signa	ature	Cond GES 1	GES Payment Policy a itions of Contract, inclu to retain personal infor need for GES service	Iding authorization for mation to better serve
	Exhibiting Company Authorized Name	e - Please Print Date			s at future events.

All Services If the Third Party is not to be invoiced for "All Services", please select specific services below. Exhibitor will need to complete Payment and Credit Card Authorization and submit with this form if Third Party is not to be invoiced for all services.

Booth Cleaning	Electrical Outlets	Electrical Labor	Exhibit Systems	GES Logistics	☐ I & D Labor ☐ Signs
Other (Please Speci	fy)				

Step 3. Provide the Third Party contact information

Third Party Company Name					
Third Party Company Address			City	State	Zip/Country
Phone	Fax	Contact's Email Address			

Step 4. Complete Third Party Credit Card Charge Authorization with signature

Cardholder Name - Please	Print				
Billing Address			City	State	Zip/Country
Account Number		Expiration Date	☐ MasterCard ☐ VISA ☐ American Expre	Pe	prporate Card prsonal Card
Please Sign	X Third Party Cardholder's Signature		GES Pay Conditions of GES to retain	ment Policy an Contract, inclue personal inform	that I have accepted d GES Terms & ding authorization for nation to better serve s at future events.
	Third Party Cardholder's Name - Please Print	Date			
	eny any Third Party Billing Request that is not complete or receiv or payment of charges for services requested by Exhibiting				

Agent does not pay the invoice before the last day of the show, charges will revert to the Exhibiting Company or its Agents. If an Agent does not pay the invoice before the last day of the show, charges will revert to the Exhibiting Company. All Invoices are due and payable upon receipt. GES Terms & Conditions of Contract, and GES' Payment Policy apply to both the Exhibiting Company and all Agents. We require your complete credit card information even if you are paying by check or bank wire transfer.

Review and Return: Return to Fax: (866) 329-1437 • International Fax: (702) 263-1520

071619 011601850

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International Third Party Billing Request

All orders are governed by the GES Payment Policy and GES Terms & Conditions of Contract as specified in this Exhibitor Services Manual.

MAGIC-FN PLATFORM | WWDMAGIC | SOURCING AT MAGIC | FOOTWEAR SOURCING AT MAGIC Las Vegas Convention Center August 11 - 14, 2019 Form Deadline Date: July 31, 2019

Booth Number

Company Name

Email

Phone Number

Return this form when a Third Party (any party other than exhibiting company) ("AGENT") should be billed for services.

Step 1. Provide the Exhibiting Company contact information and signature

Exhibiting Company Name						
Exhibiting Company Addres	S			City	State	Zip/Country
Phone Account Number	Fax	Cor	Expiration Date	☐ MasterCard ☐ VISA ☐ American Expres	Per	porate Card sonal Card
Please Sign	X Exhibiting Company Aut	horized Signature horized Name - Please Print	Date	GES Payn Conditions of C GES to retain p my need for C	nent Policy and Contract, includ personal inform GES services at	at I have accepted GES Terms & ng authorization for ation to better serve future events and NTS of the same.
Step 2. Check	services belo	w to invoice to t	he Third Party			
		be invoiced for "All Servic Credit Card Authorization a				
Booth Cleaning Forklift Labor Other (Please Specif	Electrical Outlets	Electrical Labor	☐ Exhibit Systems ☐ Rental Carpet	GES Logistics		D Labor ns
Step 3. Provide	e the Third Pa	rty contact infor	mation			
Third Party Company Name	9					
Third Party Company Addre	288			City	State	Zip/Country
Phone	Fax	Cor	ntact's Email Address			
Step 4. Comple	ete Third Part	y Credit Card Ch	arge Authoriza	tion with sig	nature	
Cardholder Name - Please	Print					
Billing Address				City	State	Zip/Country
Account Number			Expiration Date	☐ MasterCard ☐ VISA ☐ American Expres	Per	porate Card sonal Card
Please Sign	X Third Party Cardholder's	Signature		GES Payn Conditions of C GES to retain p	nent Policy and Contract, includ personal inform	at I have accepted GES Terms & ng authorization for ation to better serve
responsible for payment of ch last day of the show, charges wi Exhibiting Company and all Age	arges for services requester Il revert to the Exhibiting Comp nts. We require your complete	t that is not complete or received by the d by Exhibiting Company or its Age bany. All Invoices are due and payab e credit card information even if you a	ents, and for all acts and/or omis le upon receipt. GES Terms & Co re paying by check or bank wire tr	have advised d and agreed that the Exhi sions of its Agents. If an nditions of Contract, and GE ansfer.	l all of my AGE biting Company Agent does not pa	ay the invoice before the
Review and Re	Eturn: Return to F	ax: (866) 329-1437 • Interna	ational Fax: (702) 263-152	20		



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G-3b 011819

International Pavilion Third Party Billing Request

All orders are governed by the GES Payment Policy and GES Terms & Conditions of Contract as specified in this Exhibitor Services Manual.

MAGIC-FN PLATFORM | WWDMAGIC | SOURCING AT MAGIC | FOOTWEAR SOURCING AT MAGIC Las Vegas Convention Center August 11 - 14, 2019 Form Deadline Date: July 31, 2019

Booth Number

Company Name

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Email

Phone Number

Return this form when a third party (any party other than international pavilion) ("AGENT") should be billed for services.

Step 1. Provide the International Pavilion contact information and signature

International Pavilion Name	•							
International Pavilion Addre	ess					City	State	Zip/Country
Phone		Fax		Cor	tact's Email Address			
Account Number					Expiration Date	☐ MasterCard ☐ VISA ☐ American E	F	Corporate Card Personal Card
Please Sign			horized Signatu		Date	GES Conditio GES to r my nee	S Payment Policy a ns of Contract, incl retain personal info ed for GES services	r that I have accepted and GES Terms & uding authorization for rmation to better serve s at future events and GENTS of the same.
Step 2. Check	service	s belo	w to inv	oice to t	he Third Party			
					ces" please select speci with this form if third pa			
Booth Cleaning Forklift Labor Other (<i>Please Speci</i>)	Electrica		Electric		☐ Exhibit Systems ☐ Rental Carpet	☐GES Logis ☐Rental Fu		& D Labor Signs
Step 3. Provid	e the Th	hird Pa	rty conta	act infor	mation			
Third Party Company Name	9							
Third Party Company Addre	ess					City	State	Zip/Country
Phone		Fax		Cor	tact's Email Address			
Step 4. Comple Cardholder Name - Please		d Part	y Credit	Card Ch	arge Authoriza	tion with	signature	
Billing Address						City	State	Zip/Country
Account Number					Expiration Date	☐ MasterCard ☐ VISA ☐ American E		Corporate Card Personal Card
Please Sign	X						in placing this orde S Payment Policy a	r that I have accepted and GES Terms &
O.g.	Third Party C	ardholder's	Signature			GES to r my nee	etain personal info d for GES services	uding authorization for rmation to better serve at future events and
050			Name - Please		Date		-	GENTS of the same.
responsible for payment of ch the last day of the show, charge	arges for service s will revert to the	es requested International	by International Pavilion. All Invoi	Pavilion or its Ag	he deadline date. It is understoo jents, and for all acts and/or om ayable upon receipt. GES Terms are paying by check or bank wire t	issions of its Agent & Conditions of Cont	ts. If an Agent does n	ot pay the invoice before
Review and Re	eturn: _R	eturn to Fa	ax: (866) 329-	1437 • Interna	ational Fax: (702) 263-152	20		



International Pavilion Third Party Billing Request

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Company Name		Email	Phone Number	Booth Number			
Pavilion Organizer			Phone Number The items checked below are to be invoiced to the Third Party:				
Booth numbers (list eac	h individual booth)	The it					
Booth Number	Company Name		Booth Forklift Labor umbing aterial Handling In & Out ES Logistics ectrical Outlets (<i>Pre-Order Only</i>) ectrical Outlets (<i>Showsite-Order Onl</i> ectrical Labor (<i>Floor work & Pre-Ord</i> ectrical Labor (<i>Floor work & Showsite</i> ectrical Labor (<i>Booth work Pre-Orde</i> ectrical Labor (<i>Booth work Showsite</i> her (Please Specify)	ler Only) te-Order Only) er Only)			

Please use an additional International Pavilion Third Party Billing Request form if more space is needed for the listing of booth numbers.

For electrical orders only: A minimum of one 5amp/500 watt outlet must be ordered per booth space/number. All pavilions requiring electrical labor must send a floorplan indicating each booth where labor is to be performed. Each section of booths that form an island/pavilion will require its own electrical labor ticket. A single electrical labor ticket cannot be used to perform labor for a different island/pavilion. If you choose to supervise electrical labor and/ or want to schedule your starting point, please visit the GES Electrical Servicenter.

GES reserves the right to deny any Third Party Billing Request that is not complete or received by the deadline date. It is understood and agreed that the International Pavilion is ultimately responsible for payment of charges for services requested by International Pavilion or its Agents, and for all acts and/or omissions of its Agents. If an Agent does not pay the invoice before the last day of the show, charges will revert to the International Pavilion. All Invoices are due and payable upon receipt. GES Terms & Conditions of Contract, and GES' Payment Policy apply to both the International Pavilion and all Agents. We require your complete credit card information even if you are paying by check or bank wire transfer.

