

# 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.

SPI, ESI, and North America Smart Energy Week  
Salt Palace Convention Center  
September 24 - 26, 2019

Form Deadline Date:  
September 3, 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 Name \_\_\_\_\_

Exhibiting Company Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip/Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Contact's Email Address \_\_\_\_\_

**Please Sign**

X \_\_\_\_\_  
Exhibiting Company Authorized Signature

I agree in placing this order that I have accepted GES Payment Policy and GES Terms & Conditions of Contract, including authorization for GES to retain personal information to better serve my need for GES services at future events.

\_\_\_\_\_  
Exhibiting Company Authorized Name - Please Print \_\_\_\_\_ Date \_\_\_\_\_

## Step 2. Check services below to invoice to the Third Party

**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.

- |                                                       |                                         |                                             |                                           |                                          |                                           |
|-------------------------------------------------------|-----------------------------------------|---------------------------------------------|-------------------------------------------|------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Audio Visual                 | <input type="checkbox"/> Booth Cleaning | <input type="checkbox"/> Electrical Outlets | <input type="checkbox"/> Electrical Labor | <input type="checkbox"/> Exhibit Systems | <input type="checkbox"/> GES Logistics    |
| <input type="checkbox"/> I & D Labor                  | <input type="checkbox"/> Forklift Labor | <input type="checkbox"/> Material Handling  | <input type="checkbox"/> Plumbing         | <input type="checkbox"/> Rental Carpet   | <input type="checkbox"/> Rental Furniture |
| <input type="checkbox"/> Signs                        |                                         |                                             |                                           |                                          |                                           |
| <input type="checkbox"/> Other (Please Specify) _____ |                                         |                                             |                                           |                                          |                                           |

## 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  Corporate Card  
 VISA  Personal Card  
 American Express

**Please Sign**

X \_\_\_\_\_  
Third Party Cardholder's Signature

I agree in placing this order that I have accepted GES Payment Policy and GES Terms & Conditions of Contract, including authorization for GES to retain personal information to better serve my need for GES services at future events.

\_\_\_\_\_  
Third Party Cardholder's Name - Please Print \_\_\_\_\_ Date \_\_\_\_\_

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 Exhibiting Company is ultimately responsible for payment of charges for services requested by Exhibiting Company 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 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

Chat with us <http://www.ges.com/chat>



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