

## F L O R I S T ORGANIZED JUNGLE, INC.

MAILING: PO BOX 126 WINTER PARK FL. 32790 SHIPPING: 64 KANTAGREE TRAIL OSTEEN FL. 32764 PHN (407) 321-9080 FAX (407) 321-9042 EMAIL: INFO@ORGANIZEDJUNGLE.COM

DESCRIPTION FOR RENTAL	COST EACH	QUANTITY	TOTAL COST
Money Saving Booth Package Rates			
Booth Plant Package A, typical 10x10, (\$20.00 savings)	105.00		
One 3', One 4', One Table Top green plant			
<b>Booth Plant Package B</b> , For typical 10 x 20, (\$20 savings)	160.00		
One 3', Two 4', One Table Top Green Plant			
Table Top Green Plant	25.00		-
2-3 Foot Green Plant	45.00		
4 – 5 Foot Green Plant	55.00		
6 Foot Green Plant	75.00		
7 Foot Green Plant	85.00		
8' and over Green Plant = Call For Pricing			
Mums, Yellow White Lavender, If Available	25.00		
Flowering Plants (azaleas, etc) Red White Pink	32.50		
Bromeliads, Yellow Red Orange	35.00		
Large Fern Pothos Ivy	35.00		
Bubble Bowl, for business cards, "Yours to keep"	25.00		
INQUIRE ABOUT PLANTS AND FLOWERS FOR BANQUETS AND HOSPITALITY SUITES			
Floral Arrangements, Please Circle Tropical or Seasonal			
Single Stem White Orchid Arrangement	70.00		
Fresh Cut Flower Arrangements 12" high	65.00		
(Shape Color)			
Fresh Cut Flower Arrangements 24" high	90.00		
(Shape Color)			
Custom Floral Arrangement (please ask for quote)			
If you have a sample picture please e-mail it to us.			ļ
SUBTOTAL			
ADD 6.5% SALES TAX			
TOTAL - INCLUDING SALES TAX			
Company:			Boot
Address:			

GES EXPO

Please contact us for custom plants, trees, fountains, waterfalls etc and we can make your ideas come to life. Visit our website ORGANIZEDJUNGLE.COM

Please fax order to 407-321-9042

Orders are delivered prior to show opening

If you require a signed delivery receipt please sign here:

An additional charge of \$20.00 will be applied. ALL PRICES INCLUDE DELIVERY, CONTAINERS, SERVICING & REMOVAL AT SHOWS END.

NO REFUNDS OR ADJUSTMENTS WILL BE MADE AFTER THE CLOSE OF THE SHOW. A 50% RESTOCKING FEE WILL BE CHARGED ON ANY ORDER CANCELLED.

*≪PLEASE PAY THIS AMOUNT* 

Address:			
City:		Zip:	<del>_</del>
Phone: ()ext	_ Fax: ()		
Booth Contact:	Cell #		
E-Mail:			
Circle one: Check# VISA-MC-AMEX Ca	ard#		<del>_</del>
Exp. Date/, Credit Card billing zip cod	e:		
Print Name on Card:	Signatu	ure:	

**RETURN COPY WITH PAYMENT TO ORGANIZED JUNGLE, INC.**