| EXHIBITOR CATERING ORD              | ER FORM           |                | Phone: 407-685-5760 / Fax: 407-685-9859 Email: kelsey.kercado@centerplate.com Contact Name | On-site        | Centerplate On-site Contact |         |        |  |
|-------------------------------------|-------------------|----------------|--|----------------|-----------------------------|---------|--------|--|
|                                     |                   |                |  |                |                             |         |        |  |
| Billing Address                     |                   |                | City   | State          | Zip                         | Countr  | /      |  |
| Phone Number Fax Number             |                   |                | Email Address  | On-site        | On-site Contact's Cell      |         |        |  |
|                                     |                   |                |  |                |                             |         |        |  |
| Trade Show Name                     |                   | Hall& Boo      | oth Number or Meeting room Number  | Ві             | uilding                     | Attenda | nce    |  |
| The Green boxes contain formulas ti | hat will automati | call calculate | e your charges. Please complete all fields. <b>EMAIL BAC</b>                               | K AS AN EXC    | CEL DOCUM                   | ENT     |        |  |
| Date<br>Formatted: Enter as MM / DD | Start Time        |                | Food or Beverage Item Description Insert additional lines if needed                        | Qty            | Unit Price                  |         |        |  |
| ·                                   |                   |                |  |                |                             | Total   | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
|                                     |                   |                |  |                |                             |         | \$0.00 |  |
| CREDIT CARD AUTHORIZATIO            | ON (Can also      | be returne     | ed later with contract)  | Estimat        | ed Subtotal                 |         | \$0.00 |  |
| Name on card                        |                   |                |  | 20% Ser        | vice Charge                 |         | \$0.00 |  |
| Card Number                         |                   |                |  |                | Bar fees                    | :       |        |  |
| Card Type                           |                   |                | 1  | Chef o         | r Other fees                |         | -      |  |
| Expiration Date                     |                   |                | 1  |                | total Labor                 |         | \$0.00 |  |
|                                     | 3 or 4 digit      | on front or    | 1  | Jul            | Luboi                       |         | ψ0.00  |  |
| Security Code                       | back of card      |                | Estimated S  | Subtotal inclu | ıding Labor                 |         | \$0.00 |  |

1. Please type or print.

Signature

2. 20% service charge plus 6.5% sales tax will be added to subtotal. SERVICE CHARGE MUST BE TAXED.

3. Food service contracts will be sent to you confirming order; signed contracts and full payment must be received in our office prior to start of show. No service will commence without full payment prior to show, and credit card information on file.

4. Any replenishment orders during the show must be guaranteed by a major credit card; the balance of charges will be billed to the credit card unless payment is received at the end of the show.

Upon receipt of this form, a contract will be created and sent. Functions are considered tentative until signed contract and payment are received.

Total

\$0.00

\$0.00

6.5% Sales Tax