Advanced ordering ends March 25. 2024

Rooth No

SupplySide East Meadowlands Exposition Center Secaucus, NJ April 16-17, 2024



hibitor Name:		Booth No						RENTALS AND SALES COI	
Please	e visit www.atlanticsh	owcases	.com	to v	<u>iew a</u>	ll ca	ses offered o	n order for TOTAL	<u>n.</u> TOTAL
TCS Towers:	Towers: Circle: 3000K LED OR 6000K LED			e: Bla	ck or W	/hite		ITEMS	
TCS 2020 Tower						\$600.00			
TCS 1639 Tower							\$700.00		
TCS 1651 Tower							\$750.00		
2030 Museum							\$600.00		
2020 Museum							\$600.00		
ELITE CASES Circle: Black or White		e	4'	5	3'	6'			
Elite Full Vision							\$650.00		
Elite Half Vision							\$650.00		
Elite Quarter Vision							\$650.00		
		Full Vision		lalf sion	Quar			I	
Elite Corner Case –	39" Sq. Only						\$650.00		
	,		<u> </u>				·		
CLASSIC CASES	Black Only	4'		5'	6′	,			
Classic Half Vision	•						\$550.00		
Classic Quarter Visi	on						\$550.00		
		Half Vis	ion	Quar	ter Visi	on		1	
Classic Corner Case	- 34" Sq. Only						\$550.00		
PREMIUM ALUMIMU	IM CASES White Only	4'		5'	6	,			
Premium Full Vision	<u> </u>						\$550.00		
Premium Half Vision							\$550.00		
Premium Quarter \	/ision						5750.00		
Premium Corner Cases – 36" Sq.		Qua	Quarter Vision Only			\$550.00			
STANDARD CASES	Circle: Black or White	4'		5'	6	,			
Standard Full Vision		4		5	0		\$450.00	T	
Standard Half Vision							\$450.00		
Standard Quarter V							\$450.00		
Standard Corner Case – 34" Sq. Only		ŀ	Half Vision Only				\$450.00		
Standard Wall Case							\$800.00		
Standard See-Thru Case							\$850.00		·
Standard 2020 Tower							\$600.00		
			0000			0.00		Subtotal	
			OKDE	KED	AFTER	3/2	5/24 ADD \$100.0	U Per Case	
							6.625	% SalesTax	
								TOTAL	



Exhibitor Name: ______Booth Number: _____

Placement of Showcases

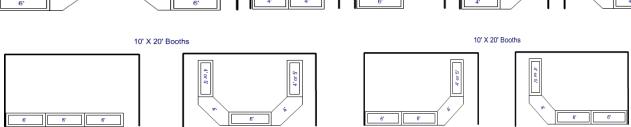
Back Wall of Booth

Side Wall of Booth

Booth Opening

Sample Showcase Layouts 10' X 10' Corner Booths 10' X 10' Booths







Exhibitor Name:	Booth Number:	

PAYMENT INFORMATION

Visa/Mastercard/Discover/American Express

Authorized Signature	Date
the amount of the Total shown hereon and agrees to	lder. Cardholder acknowledges receipt of goods and/or services in o perform the obligation set forth in the Cardholder's agreement with issuer.
	Date of Sale:
	Total Due:
Email:	
	CVN:
Credit Card Number:	
Phone Number:	
Cardholder's Name:	

DISCLAIMER

Cases are rented for display purposes only. We do not warranty the safety thereof. We are not liable for contents, damage or breakage after cases have been delivered.