



# Audio Visual Order Form

**Wisconsin Exposition Center at State Fair Park**  
 8200 W. Greenfield Avenue, West Allis, WI 53214 • Attn: Exhibitor Services  
 Phone: 414-727-8841 • Fax: 414-727-8842  
 www.wiexpoenter.com

Name of Event \_\_\_\_\_ Dates of Event \_\_\_\_\_  
 Company Name \_\_\_\_\_ Booth Number \_\_\_\_\_  
 Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Requested Install Date: \_\_\_\_\_ Time: \_\_\_\_\_ Requested Removal Date (Cannot be guaranteed): \_\_\_\_\_ Time: \_\_\_\_\_

**FULL PAYMENT FOR SERVICES ORDERED INCLUDING TAX MUST ACCOMPANY FORM. INCOMPLETE ORDERS WILL NOT BE PROCESSED.**

Qty	Description	Daily Rate	X Number of Days	Show Rate 3 or more days	Rental Amount
_____	19 "TV/VCR Combo (Includes AV Cart)	\$60.00	_____	\$150.00	_____
_____	27" TV/DVD/VCR Combo (Includes AV Cart)	\$80.00	_____	\$200.00	_____
_____	VCR/DVD Combo (Includes AV Cart)	\$55.00	_____	\$137.50	_____
_____	27 " TV (Includes AV Cart)	\$65.00	_____	\$162.50	_____
_____	VCR or DVD Player	\$40.00	_____	\$100.00	_____
_____	*42" Plasma Screen	\$275.00	_____	\$690.00	_____
_____	*50" Plasma Screen	\$300.00	_____	\$750.00	_____
_____	*17" LCD Flat Screen	\$60.00	_____	\$150.00	_____
_____	*19" LCD Flat Screen	\$70.00	_____	\$175.00	_____
_____	*Floor Stand for Plasma	\$35.00	_____	\$90.00	_____
_____	Cassette or CD Player	\$40.00	_____	\$100.00	_____
_____	XGA LCD Projector 2000 Lumen (Includes AV Cart)	\$350.00	_____	\$875.00	_____
_____	XGA LCD Projector 1400 Lumen (Includes AV Cart)	\$250.00	_____	\$625.00	_____
_____	Overhead Projector (Includes AV Cart)	\$30.00	_____	\$75.00	_____
_____	6" Tripod Screen	\$25.00	_____	\$62.50	_____
_____	Microphone Handheld-Wired	\$30.00	_____	\$105.00	_____
_____	Microphone Handheld-Wireless	\$80.00	_____	\$200.00	_____
_____	Microphone Lavalier-Wireless	\$80.00	_____	\$200.00	_____
_____	**Portable Sound System	\$185.00	_____	\$462.50	_____
_____	Mixer, 4 Channel	\$40.00	_____	\$100.00	_____
_____	Labor Per Hour \$80 OT \$120				

\* No charge delivery & pick up fees during normal business hours. Off hours may increase fee.  
 Overtime rates apply after 5:00 p.m. Mon-Fri and weekends, Saturday, Sunday  
 \* \* May require a WEC technician.

Additional Equipment/Services available. Please call for pricing.

<b>Total Rental Amount</b>	\$ _____
<b>5.6% Tax</b>	\$ _____
<b>Grand Total</b>	<b>\$ _____</b>

**Payment Information**     Check     Credit Card

Mail Payments and Order Form to address above or fax your order with credit card information to number above.  
 Services payable to: Wisconsin Exposition Center. A service fee of \$35.00 will be assessed for any returned checks.

VISA     Master Card     American Express     Discover

Card Number \_\_\_\_\_ Credit Card Expiration Date: \_\_\_\_\_ 3-digit security code (    )

Name on Credit Card: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

<b>In-House Only:</b> Date Received: _____	Total Received: _____	Form of Payment: _____
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