



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	_____
_____	*43" Plasma Screen	*	_____	*	_____
_____	*32" Plasma Screen	*	_____	*	_____
_____	*17" LCD Flat Screen	*	_____	*	_____
_____	*19" LCD Flat Screen	*	_____	*	_____
_____	*Floor Stand for Plasma	*	_____	*	_____
_____	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		_____		_____

* Call for rates on these and other specialty items. 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.

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: _____

Total Rental Amount	\$ _____
5.6% Tax	\$ _____
Grand Total	\$ _____

In-House Only: Date Received: _____	Total Received: _____	Form of Payment: _____
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