

**Exhibit Information**  
**Cleveland Clinic**  
**Valve Disease, Structural Interventions, and Diastology Summit**  
**March 8-10, 2019 - Loews Portofino Hotel, Orlando**

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**LOCATION**

Exhibits will be 6' tabletop displays located in the Tuscan Ballroom Foyer.

**SET UP**

Thursday, March 7 from 4:00 pm-6:00 pm or Friday, March 8 from 5:15 am-6:00 am.

**EXHIBIT TIMES** (refer to final agenda for updates [www.ccfcmec.org/echo](http://www.ccfcmec.org/echo))

<b>Friday, March 8</b>	5:15 am-6:50 am	Exhibits will be open during Continental Breakfast, Coffee with the Experts, and breaks.
	9:40 am- 10:00 am	
<b>Saturday, March 9</b>	5:30 am-7:00 am	Exhibits will be open during Continental Breakfast, Coffee with the Experts, and breaks.
	9:40 am- 10:00 am	
<b>Sunday, March 10</b>	5:45 am-7:00 am	Exhibits will be open during Continental Breakfast, Coffee with the Experts, and breaks.
	9:40 am- 10:00 am	

**SECURITY**

Since no overnight security is available, you will need to take down anything of value from your display and re-set it each morning.

**SHIPPING and ELECTRICAL**

Complete the electrical order form for any power you may need. If you need an extension chord or other electrical needs, it will be serviced by GES and may be ordered online or with the attached GES Electrical Outlets Order Form: <https://ordering.ges.com/052696445> .

The hotel shipping department is open Mon-Fri from 7:00 am-5:00 pm, and Sat 7:00 am – 12:00pm. Shipping and handling fees will be charged as outlined below:

Material should be shipped to arrive **no sooner than 3 days prior to the course.**

Small (under one foot & less than 25 lbs)	\$ 5.00
Medium (one to two feet & less than 50 lbs)	\$10.00
Large (over two feet & less than 75 lbs)	\$15.00
Oversized (over three feet & up to 100 lbs)	\$20.00
**over 100 lbs is prorated per each 100 lbs	
Freight/Pallet	\$100.00

**Labels must be on your boxes:**

Cleveland Clinic /March 8-10, 2019
Attn: Liz Massi
Loews Portofino Hotel
5601 Universal Boulevard
Orlando, FL 32819
407.503.1000
Hold for: <On-Site Recipient's Name & Company>

# Payment and Credit Card Charge Authorization

All orders are governed by the GES Payment Policy and GES Terms & Conditions of Contract as specified in this Exhibitor Services Manual.



Cleveland Clinic  
Loews Portofino Bay Hotel  
March 7 - 10, 2019

Form Deadline Date:  
February 14, 2019

Exhibiting Firm Company Name		Name of Primary Contact		Booth Number
Street Address		City, State, Zip/Country	Primary Contact Phone	Email
Phone	Fax	Name of Secondary Contact (Optional)		
Name of Contact at Booth/Show Site		Phone	Secondary Contact Phone	Email
Please indicate if you will be using a Third Party for billing of services: <input type="checkbox"/> No <input type="checkbox"/> Yes - Please return Third Party Billing Request form		GES invoice Sent to: <input type="checkbox"/> Primary Contact <input type="checkbox"/> Secondary Contact		

## Payment Information

- Please complete the information and return payment in full with this form and your orders. You may choose to pay by credit card, check or bank wire transfer, however, we require your credit card charge authorization to be on file with GES.  
*Only submitting your Credit Card Authorization? Do it online: <http://e.ges.com/052696445/item/2222>*
- All balances must be paid at the conclusion of the event. You agree to late fees up to 1.5% per month on any balance not paid at the conclusion of the event, or balance left without appropriate credit card on file.
- For your convenience, we will use this authorization to charge your credit card for any additional amounts ordered by your representative or services rendered to your company for this event.
- GES will charge a convenience fee for each request to reprocess payment to an alternate credit card in order to cover incremental processing costs. An alternate credit card is a credit card different than the one used to process your initial payment in accordance with GES payment policy. The convenience fee will be quoted at the time your request is made to reprocess payment. The convenience fee will be added to your account balance and settled utilizing the new credit card provided.

GES requires the highest standards of integrity from all employees. Please call our confidential Always Honest Hotline at (866) 225-8230 to report fraudulent or unethical behavior.

## Bank ACH/Wire Transfer Payment Information

Beneficiary: c/o Bank of America 901 Main Street, TX1-492-07-14 Dallas, TX 75202-3714 USA Telephone # (702) 263-2795 or (702) 914-5112	GES Account #: 7188101819 Wire ABA Routing #: 026009593 ACH ABA Routing #: 071000039 SWIFT Address: BOFAUS3N CHIPS Address: 0959	If requested, following is the physical address for routing identifiers: Bank of America, Wire Transfer-Customer Services 2000 Clayton Road, Concord, CA 94520 USA
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For ACH/Wire Transfer send the following information to GES via email to Cash Application Team at [cashapplication@ges.com](mailto:cashapplication@ges.com).

- Exhibiting company name, show name, show facility, and booth number
- Date and amount of wire transfer
- Bank and country where transfer originated

## Credit Card Charge Authorization (Required for All Forms of Payment)

All information must be provided. Your order will not be processed if any information is missing. We require your credit card charge authorization to be on file with GES even if you are paying by check or bank wire transfer.

Cardholder Name - Please Print

Billing Address

City State Zip/Country

Account Number Expiration Date  MasterCard  Corporate Card  
 VISA  Personal Card  
 American Express

I agree in placing this order that I have accepted GES Payment Policy and GES Terms & Conditions of Contract, including authorization for GES to retain personal information to better serve my need for GES services at future events.

**Please Sign** X MM/DD/YY  
 \_\_\_\_\_  
 Cardholder Signature Check Number Check Dated  
 \_\_\_\_\_  
 Cardholder Name - Please Print Date

<b>Total Check Payment</b>	\$
<b>Total Credit Card Payment</b>	\$

## Review and Return

Credit Card Payments Return to Fax: (866) 329-1437 • International Fax: (702) 263-1520 • GES National  
 Servicenter@: (800) 475-2098  
 Check Payments Return to GES • Bank of America P.O. Box 96174, Chicago, IL 60693

Chat with us <http://www.ges.com/chat>



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# Electrical Outlets Order Form

All orders are governed by the GES Payment Policy and GES Terms & Conditions of Contract as specified in this Exhibitor Services Manual.



Cleveland Clinic  
Loews Portofino Bay Hotel  
March 7 - 10, 2019

Discount Deadline Date:  
February 14, 2019

Company Name	Email	Phone Number	Booth Number
Show Site Contact	Show Site Email	Show Site Phone Number	



## Easy Ordering Tips:

- Order your outlet(s) for each area in your booth requiring power, 5 amp minimum required. Be sure to submit your electrical floor plan that designates a main drop location (MDL). There must be an MDL provided for all Island booths.
- Power Service and Motor Outlets - All 208V connections require labor.

### 120v Motor and Equipment Outlets

Item Code	Description	Discount (\$)	Regular (\$)	Qty	Tax %	Total
700001	005 Amp/500 Watts, 1/4 HP 120V	153.50	218.00		6.5	\$
700002	010 Amp/1000 Watts, 1/4 HP 120V	225.25	312.50		6.5	\$
700003	015 Amp/1500 Watts, 1/4 HP 120V	291.25	404.50		6.5	\$
700004	020 Amp/2000 Watts, 1/4 HP 120V	357.25	496.50		6.5	\$

### 1P 208v Motor and Equipment Outlets\*

Item Code	Description	Discount (\$)	Regular (\$)	Qty	Tax %	Total
700012	010 Amp, 1/2 HP 208V / 1Phase	396.75	551.50		6.5	\$
700014	020 Amp, 1 HP 208V / 1Phase	556.00	772.00		6.5	\$
700017	100 Amp, 10 HP 208V / 1Phase	1,231.25	1,709.75		6.5	\$
700018	200 Amp, 25 HP 208V / 1Phase	1,985.00	2,757.00		6.5	\$

### 3P 208v Motor and Equipment Outlets\*

Item Code	Description	Boost	Discount (\$)	Regular (\$)	Qty	Tax %	Total
700022	010 Amp, 1 HP 208V / 3Phase	<input type="checkbox"/>	532.25	738.75		6.5	\$
700024	020 Amp, 3 HP 208V / 3Phase	<input type="checkbox"/>	744.75	1,034.50		6.5	\$
700025	030 Amp, 5 HP 208V / 3Phase	<input type="checkbox"/>	957.75	1,330.25		6.5	\$

\* Requires booth work labor (See Electrical Booth Work Labor Order Form); maximum one (1) connection per outlet. If no labor form is received for booth work, an automatic labor ticket will be generated and billed accordingly. Rates based on when complete information is received. 208v services require 1 hour minimum labor.

### Transformers

Item Code	Description	Discount (\$)	Regular (\$)	Qty	Tax %	Total
700114	Amp, Buck Boost Per Amp, 20 Amps Minimum	7.50	10.25		6.5	\$

### Electrical Accessories

Item Code	Description	Discount (\$)	Regular (\$)	Qty	Tax %	Total
702009	1/4" Cable Per Foot	4.50	4.50		6.5	\$
700246	Cord Cap, 20 AMP, 3 Wire	46.50	46.50		6.5	\$
700247	Cord Cap, 20 AMP, 5 Wire	46.50	46.50		6.5	\$
700287	Cube Tap, 3 Way Plug	12.50	12.50		6.5	\$
700130	Extension Cord, 14/3 120V, 15'	25.75	25.75		6.5	\$
700131	Extension Cord, 14/3 120V, 25'	36.25	36.25		6.5	\$
700132	Extension Cord, 14/3 120V, 50'	51.50	51.50		6.5	\$
700099	Plug Strip, 120 Volt	36.25	36.25		6.5	\$

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# Electrical Outlets Order Form

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Discount Deadline Date:  
February 14, 2019

Company Name \_\_\_\_\_ Email \_\_\_\_\_ Phone Number \_\_\_\_\_

Show Site Contact \_\_\_\_\_ Show Site Email \_\_\_\_\_ Show Site Phone Number \_\_\_\_\_

Will you need 24 Hour Power? Please note, this will show as doubled the published rate on your final invoice.

Exhibitors are not permitted to use power unless ordered. Exhibitors found using outlets without an order will be subject to the regular rate for outlets used. Sharing power or plugging into facility outlets is strictly prohibited.

Cancellation Policy: Items cancelled will be charged 50% of original price after move-in begins and 100% of original after installation.

**Total and Sign:** Return to Fax: (866) 329-1437 • International Fax: (702) 263-1520

**Please Sign**  \_\_\_\_\_  
Authorized Signature

\_\_\_\_\_ Date  
Authorized Name - Please Print

I agree in placing this order that I have accepted GES Payment Policy and GES Terms & Conditions of Contract, including authorization for GES to retain personal information to better serve my need for GES services at future events.

**Total Payment Enclosed** \$ \_\_\_\_\_

By signing and delivering the Electrical Outlets Order Form to GES Electrical, the customer agrees to all terms and conditions printed on this form along with the information provided on the Frequently Asked Questions and the Safety and Regulations Form.

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