

F R E E M A N

3323 I H 35 North, Ste 120
San Antonio, TX 78219
(210) 554-2021 Fax: (469) 621-5611

DISCOUNT PRICE
DEADLINE DATE
SEPTEMBER 18, 2018

INCLUDE THE FREEMAN METHOD OF
PAYMENT FORM WITH YOUR ORDER

HEALTHCARE FACILITIES SYMPOSIUM - DESIGN GALLERY

OCTOBER 8-9, 2018

NAME OF SHOW: _____

COMPANY NAME _____ BOOTH #: _____

CONTACT NAME _____ PHONE #: _____

E-MAIL ADDRESS _____

For Assistance, please call (407) 816-7900 to speak with one of our experts or speak to a specialist:

scehibitorsales@freemanco.com

For fast, easy ordering go to www.freemanco.com/store

GRAPHICS AND SIGNS

To order your graphics, complete this order form and attach your sign copy or electronic file.
Please see guidelines for electronic files on the reverse side of this form.

NOTE: All Graphics are subject to a 100% Cancellation Charge.

We can create your posters with the following specifications:

- 40" x 40" \$247.30 per board
- 1/2" foamcore
- Grommets will be provided on all four corners

PLEASE INCLUDE YOUR GRAPHIC FILE COMPATIBILITY SHEET

(See attached guidelines for submitting artwork.)

TOTAL COST

Subtotal _____ + Tax (8.25%) _____ =TOTAL _____

CUSTOMER GUIDELINES FOR SUBMITTING GRAPHICS ARTWORK

Our desire is to provide you with the best possible quality graphics for your event or exhibit. You can help us in that effort by providing digital art files using the following guidelines. If you are sending us completed, print-ready files, please pass the following information on to your graphics designer. Two overall considerations for submitting acceptable artwork involves proper resolution or size of the file to avoid poor quality images, and proper color matching information and proofs to ensure accurate color reproduction.

PLEASE PROVIDE THE FOLLOWING WHEN SUBMITTING ART

Minimum requirements for original artwork, such as logos, when Freeman is providing design and layout:

- 300 dpi resolution at a size of 8 x 10 inches (higher resolution files will result in improved final product)

Minimum requirements for final artwork that Freeman will reproduce exactly as provided:

- 100 dpi resolution at full size of actual finished product

Minimum requirements for both:

- All related PMS and/or CMYK color codes (if submitting CMYK values, please supply accurate color swatches)
- Accurate color proof print of artwork
- Contact name, phone number and e-mail address of art creator if applicable
- If submitting a "vector" file, include all fonts, or convert fonts to outlines or paths

ACCEPTABLE FILE SOFTWARE FORMATS

We are capable of working with both PC and MAC based software, and can accept art created with the following software programs (listed in order of preference):

- ADOBE—Illustrator, InDesign, and Photoshop
- COREL DRAW
- QUARK XPRESS

Files should always be saved in their native format.

ACCEPTABLE FILE TYPES

Files that Freeman **can use** in order of preference, include:

- EPS and AI (especially when submitting logos)
- TIF (especially when submitting photos)
- JPG (provided resolution is high enough for photo images; not recommended for logos)

File types that Freeman **cannot use** to reproduce high quality graphics include:

- GIF files
- Microsoft Office software files such as Word (.doc), or PowerPoint (.ppt) file types
- Self-extracting files, such as EXE or SEA files

WAYS TO SEND ARTWORK

• Artwork files that are of acceptable resolution as listed above will typically be too large to send via e-mail. Files should be sent via overnight delivery on either a CD-ROM or a DVD. A printed hard proof needs to accompany the files.

• Files may also be posted to Freeman's FTP site. You may get the password and other needed information from your Freeman service representative in order to post files. However, a hard copy proof and backup must be sent via overnight delivery in addition to posting the electronic files.

Please visit us at: www.freemanco.com

FREEMAN

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INCLUDE THIS FORM
 WITH YOUR ORDER
 PLEASE USE BLACK INK

NAME OF SHOW: **HEALTHCARE FACILITIES SYMPOSIUM - 467328 / OCTOBER 8-9, 2018**

COMPANY NAME: _____ BOOTH #: _____

ADDRESS: _____ BOOTH SIZE : _____ X

CITY/STATE/ZIP: _____

PHONE: _____ EXT.: _____ FAX #: _____

SIGNATURE: _____ PRINT NAME: _____

CONTACT'S E-MAIL: _____

E-MAIL FOR INVOICE: _____ **Check if you are a new Freeman customer**
Invoices will be sent by e-mail; please provide e-mail address of the person who reconciles your invoices if different than contact's email.

METHOD OF PAYMENT

BY SUBMITTING THIS FORM VIA FAX OR POSTAL MAIL OR ORDERING MATERIALS OR SERVICES FROM FREEMAN, YOU AGREE TO BE BOUND BY ALL TERMS & CONDITIONS INCLUDED IN YOUR SERVICE MANUAL.

COMPANY CHECK
 Please make check payable to: Freeman
 Checks must be in U.S. funds drawn on a U.S. or Canadian bank. ("U.S. FUNDS" MUST BE PRE-PRINTED on Canadian checks.)
Please reference (467328) on your remittance.

CREDIT/DEBIT CARD
 For your convenience, we will use this authorization to charge your credit/debit card account for your advance orders, and any additional amounts incurred as a result of show site orders placed by your representative. These charges may include all Freeman companies, or any charges which Freeman may be obligated to pay on behalf of Exhibitor, including without limitation, any shipping charges. Please complete the information requested below:

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- Remember to order in advance to save time and money. You may place your order by phone, fax, mail, or use our online ordering service at: www.freeman.com.
- Orders received after the deadline or without payment will be charged the Standard price.
- Copies of invoices may be picked up from the Freeman Service Center prior to show closing.
- If you have questions or need assistance with any items not listed, please call and ask for Exhibitor Sales.

FREEMAN method of payment