



CREATIVE. TECHNICAL.

Memorable.

PAYMENT AUTHORIZATION FORM

Compounding Pharmacy Compliance

52 Forest Ave., Suite 6, 2nd Fl
Paramus, NJ 07652
P 201-340-2290; Fax 201-340-2108
E-Mail: info@metromultimedia.com

JUNE 21 - 22, 2022

DISCOUNT DEADLINE: 6/3/2022

HILTON ALEXANDRIA MARK CENTER

Form with fields for Company, Address, City, State Zip, Phone, Ordered by, Email Address, Booth, and ESTIMATED TOTALS table.

YOUR SIGNATURE OF THIS PAYMENT AUTHORIZATION FORM DENOTES ACCEPTANCE OF ALL TERMS & CONDITIONS INCLUDED ON THIS FORM AND ON YOUR ORDER FORMS

Company Check - Make payable to MetroMultiMedia, and reference COMPOUNDING PHARMACY COMPLIANCE. Mail to: 52 Forest Ave, Suite 6, 2nd Floor, Paramus, NJ 07652

**Please Note - Returned checks are subject to a \$35.00 bounced check fee. ALL CHECKS REQUIRE A CREDIT CARD BACK UP.

Wire Transfers - If paying by wire transfer please contact MetroMultiMedia for wire transfer information and include a \$40.00 wire transfer fee.

ALL WIRE TRANSFERS REQUIRE A CREDIT CARD BACK UP.

Credit Card - For your convenience, MetroMultiMedia Services will use this authorization to charge your credit card account for your advance orders, not paid by check or wire, and any additional amounts incurred as a result of show site orders placed by you or your representative.

AMEX VISA MASTERCARD DISCOVER

Exp. Date

Table for Account Number and Security Code with input fields.

Cardholder Name (Please Print):

Cardholder Billing Address:

City/State/Zip: Phone:

***The cardholder names above hereby authorize MetroMultiMedia to charge my credit card for the actual costs of the services estimated above and any additional services and amounts including, but not limited to, labor to install or remove equipment and/or material handling charges.

Cardholder Signature: Date:

PAYMENT POLICY: MetroMultiMedia requires payment of estimated costs in full, including applicable taxes, at the time services are ordered.

TAX EXEMPT STATUS: If you are exempt from paying sales tax, you must provide a certificate of exemption for the state in which services are to be provided, with your order.

EQUIPMENT: You are responsible for payment on any MetroMultiMedia rental equipment.

CANCELLATIONS - EQUIPMENT CANCELLATIONS NOT RECEIVED 48 HRS BEFORE DELIVERY DATE WILL BE CHARGED 100% - ** NO EXCEPTIONS ** ALL CANCELLATIONS ARE SUBJECT TO A 5% PROCESSING FEE. CANCELLATIONS RECEIVED AFTER DISCOUNT DEADLINE DATE ARE SUBJECT TO A 25% RESTOCKING FEE



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MetroMultiMedia Order Form

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Company Name: Booth #: Booth Size:
Address: City: State: Zip:
Contact Name: Phone: E-Mail:
Delivery Date/Time: Pick Up Date/Time:
On Site Contact Name: On Site Contact Phone:

Table with columns: Audio Equipment, Qty., Discounted Daily Rate, Regular Daily Rate, # of Days, Total. Includes sections for Projection, Computers & Accessories, and Video and Data Display.

Please Note: To receive a confirmation of your order prior to event, please e-mail: info@metromultimedia.com.
Drayage Costs (if applicable) are not included in delivery costs. Regular rate applies if order is received after deadline date.
In venues where union rules are in effect, delivery and pick up times may vary depending on availability of laborers.
**Dual Post Floor Stands and Shelves are only available with order of Flat Panel Display Monitors.

SUBTOTAL = _____ + TAX @ 6.0% = _____ + \$150.00 Deliver & Pick-Up = TOTAL _____
Payment Authorization Form must accompany order.
All Cancellations are subject to a 5% processing fee. Cancellations received after discount deadline date are subject to a 25% restocking fee.
Equipment Cancellations not received 72 Hrs. before delivery date will be charged 100% - **NO EXCEPTIONS**