

Show Dates: September 10-12, 2025

GO BACK TO TABLE OF CONTENTS ←

Discount deadline: August 22, 20255

## A CUSTOM BOOTH?

click here

# NEED SHIPPING TO AND FROM A TRADESHOW?



click here

## **NEED ANYTHING?**

Phone: 305-751-1234 | Fax: 305-751-1298

## **Exhibitor Service Manual**



## **Third Party Payment**

#### THIS FORM IS TO BE FILLED OUT ONLY IF YOU HAVE HIRED A THIRD PARTY TO SET UP YOUR BOOTH.

THIRD PARTY PAYMENT CONDITIONS

This form must be completed and signed by BOTH PARTIES and returned to Expo CCI prior to placing any orders. If there is any doubt which party is to be invoiced for a service, the exhibiting firm accepts responsibility for payment. The exhibiting firm is ultimately responsible for payment of all charges by show conclusion. If charges have been billed to the wrong party and Expo CCI was not provided with the completed Third Party Payment Policy prior to the order being placed, any refund must be settled between the exhibiting firm and third party.

### PLEASE INDICATE WHICH ITEMS/SERVICES ARE TO BE INVOICED TO THE THIRD PARTY:

All Expo Services	Booth Cle	eaning	Booth Labor			
Freight Handling	Furniture	/Carpet	Other (Specify)			
· ·		le for payment of charges incu nd exhibiting firm will make pay				
Authorized Firm Repr	esentative Signature:					
		Ma accort American E	unroom Vian MontarCard a	nd Diagovar Card	for your convenience	

We accept American Express, Visa, MasterCard and Discover Card for your convenience A non-official contractor form and COI must accompany the Third Party Payment form.

## **EXHIBITING COMPANY**

Exhibiting Company:			Booth #:						
Address:									
City:	State:	Country: Zip:							
Email:		Contact/s:							
Credit Card Used For Payment: No.:			Expires:						
Security Code:		[The 3 numbers on back of card or for Amex the 4 numbers on the front]							
Billing Address for credit card:									
City:		State:	ZIP CODE:						
Credit Card Holder (Print Name):		Card Holder Signature:							

\*\*\*\*\*\*Cardholder hereby authorizes EXPO CCI to charge credit card described herein for all charges incurred by Exhibitor and has read, understands, and agrees to all forms in the exhibitor manual and agrees to pay all charges as described in Cardholder Agreement. All estimated charges must be paid in ADVANCE, AND a valid credit card must be on file with EXPO CCI authorizing payment for modified and/or additional charges. All Charges must be paid by end of Show.

On-site exchanges/cancellations of any orders/furnishings will be assessed a 100% pick-up fee.

#### THIRD PARTY

Third Party Company:			Booth #:	
Address:				
City:	State:	Country: Zip	0:	
Email:		Contact/s:		
Credit Card Used For Payment: No.:			Expires:	
Security Code:		[The 3 numbers on back of card or for Amex the 4 numbers on the front]		
Billing Address for credit card:				
City:		State:	ZIP CODE:	
Credit Card Holder (Print Name):		Card Holder Signature:		

\*\*\*\*\*\*Cardholder hereby authorizes EXPO CCI to charge credit card described herein for all charges incurred by Exhibitor and has read, understands, and agrees to all forms in the exhibitor manual and agrees to pay all charges as described in Cardholder Agreement. All estimated charges must be paid in ADVANCE, AND a valid credit card must be on file with EXPO CCI authorizing payment for modified and/or additional charges. All Charges must be paid by end of Show. On-site exchanges/cancellations of any orders/furnishings will be assessed a 100% pick-up fee. A non-official contractor form and COI must accompany the third Party Payment form.

15959 NW 15th Avenue, Miami, Florida 33169 ALL ORDERS MAY ALSO BE PLACED THROUGH OUR SECURE ONLINE PORTAL (https://expocci.boomerecommerce.com)