Convention Plant Designs, Inc.

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Metairie, LA 70002
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DIGITAL PLANT

March 1-3, 2010
Hilton Americas Houston
Houston, TX

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QUANTITY	ITEM		UNIT PRICE	TOTAL
	PURCHASE ITEMS:			
	MUMS YELLOW ____ WHITE ____ OTHER ____		$20.00	$ -
	KALANCHOES		$25.00	$ -
	AZALEAS RED ____ Lt. PINK ____ WHITE ____		$30.00	$ -
	BROMELIADS		$30.00	$ -
	FLOWER ARRANGEMENT: Description	$55.00 & Up		$ -
	TROPICAL ARRANGEMENT: Description	$65.00 & Up		$ -
	AROMATHERAPY ARRANGEMENT: CITRUS - EUCALYPTU	$55.00 & Up		$ -
	BUBBLE BOWL		$30.00	$ -
	RENTAL ITEMS:			
	6 INCH GREEN PLANT - TABLE TOP		$20.00	$ -
	LARGE FERN - LARGE IVY - LARGE POTHOS		$30.00	$ -
	3' GREEN PLANT		$40.00	$ -
	4' GREEN PLANT		$50.00	$ -
	5' GREEN PLANT		$60.00	$ -
	6' GREEN PLANT		$70.00	$ -
	TALLER MATERIAL	**PRICED UPON REQUEST**		
	TYPE OF CONTAINER Wicker ____ White ____ Black ____			
INQUIRE ABOUT PLANTS AND FLOWERING FOR BANQUETS AND HOSPITALITY SUITES				

RENTAL PRICE INCLUDES PLANT CONTAINER, DELIVERY, INSTALLATION, MAINTENANCE AND REMOVAL

COMPANY NAME _____ TOTAL MATERIAL CHARGE $ -

ADDRESS: _____ 8.25% SALES TAX $ -

CITY, STATE, ZIP: _____ INVOICE TOTAL $ -

PHONE: _____ FAX: _____ LESS PREPAYMENT $ -

EMAIL ADDRESS: _____ TOTAL AMOUNT DUE $ -

BOOTH NUMBER: _____ BOOTH REP: _____

PURCHASE ORDER NUMBER: _____ AUTHORIZED SIGNATURE: _____

☐ Do you need a designer to help you with your selection? Date & Time:

POLICIES: All orders require payment in advance or payment at the show site. Cash, Check, Visa, MasterCard or American Express are accepted. If tax exempt, enclose a copy of your tax exemption certificate. Rental items missing upon dismantling are the responsibility of the exhibitor. Missing and/or damaged product must be reported to our representatives prior to show close for any pricing adjustment.

To charge your account for additional floral services incurred during the show, please sign the credit card authorization:
X _____

IF PAYING BY CREDIT CARD, PLEASE COMPLETE THE FOLLOWING

☐ **American Express** ☐ **Visa*** ☐ **MasterCard***

Account Number: *CODE ON THE BACK OF CARD

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐☐☐ *** CODE REQUIRED**

Expiration Date: ____/____

Cardholder Name: (Please Print or Type) _____

Billing Address: _____

City, State, Zip: _____

Cardholder Signature: **X** _____