



**LIBERTY  
EXPOSITION  
SERVICES, INC.**

# Electrical Order Form

# Branson Convention Center

Discount Price Deadline Date: **14 days prior to move in date**  
 Mail or fax Electrical order with payment to Liberty Exposition Services  
 Questions - Please email [branson@libertyexpo.com](mailto:branson@libertyexpo.com)

3615 Gardner Avenue - Kansas City, MO 64120 - Phone: 816/891-9500 - Fax: 816/891-9507 - Web Site: [libertyexpo.com](http://libertyexpo.com)

*Please send diagram on placement of electrical services, otherwise outlets will be placed in the back of the booth.*

### STANDARD ELECTRICAL SERVICE

Qty.	Discount	Standard	Extended
_____ 500 watt - 5 AMPS	\$ 70.00	\$ 104.00	\$ _____
_____ 1000 watt - 10 AMPS	\$ 94.00	\$ 136.00	\$ _____
_____ 2000 watt - 20 AMPS	\$130.00	\$ 189.00	\$ _____

### SERVICE ACCESSORIES (Does not include cost of outlet)

_____ Plug Strip (6-spots)	\$ 40.00	\$ 50.00	\$ _____
_____ Surge Strip(6-Spots)	\$ 65.00	\$ 75.00	\$ _____
_____ Flood Lights	\$ 48.00	\$ 62.00	\$ _____
_____ 1 Clip - 25' Extension Cord	\$ 20.00	\$ 28.00	\$ _____

### SPECIAL ELECTRICAL SERVICE - 208 & 480 Volt Single or Three Phase

There is a minimum labor charge of (1) hour for installation & ½ hour for removal of all high voltage service. Material charges may apply. If you require services not listed on this form please call for a quote.

_____ 208v - 20 Amp Single Phase	\$ 250.00	\$ 350.00	\$ _____
_____ 208v - 30 Amp Single Phase	\$ 270.00	\$ 378.00	\$ _____
_____ 208v - 60 Amp Single Phase	\$ 400.00	\$ 592.00	\$ _____
_____ 208v - 100 Amp Single Phase	\$ 625.00	\$ 980.00	\$ _____
_____ 208v - 20 Amp Three Phase	\$ 330.00	\$ 462.00	\$ _____
_____ 208v - 30 Amp Three Phase	\$ 360.00	\$ 504.00	\$ _____
_____ 208v - 60 Amp Three Phase	\$ 455.00	\$ 592.00	\$ _____
_____ 208V-100 Amp Three Phase	\$800.00	\$1200.00	\$ _____

#### TERMS:

100% of the Electrical payment must be received prior to the deadline date to qualify for the discount price.

All payments received after the deadline date will be charged at the standard rate.

**No service** will be installed until full payment has been made.

Claims **will not** be considered unless filed in writing by exhibitor prior to close of show.

**No credit** will be issued on outlets installed as ordered and not used.

Building utility outlets are not a part of booth space and are **not** to be used by exhibitors.

All electrical connections must be made by the contractor. Any type of zip cords, power strips, romex or cube taps, etc. **will not** be permitted.

Any such connections in the booths will have to be rewired by the Electrician to conform with the facilities regulations, and will be charged to the exhibitor.

Special services will be charged at prevailing rates. Hourly rates will be subject to overtime.

#### Work Requiring Liberty Expo Labor:

#### Electrical & Network distribution under carpet and flooring

*Electrical & Network distribution overhead and/or through booth structure.*

*Connection / Disconnection of all 208 or higher voltage services.*

*Wiring or repairs of electrical equipment*

*Hardwiring of all electrical connections.*

#### Labor Rates:

**Straight Time \$ 55.00 (Monday-Friday, 8:00 a.m. - 4:30 p.m.)**

**Overtime \$ 110.00 (Before 8:00 a.m./After 4:30 p.m. Mon-Fri & ALL DAY Weekends & Holidays)**

SET-UP: Date: \_\_\_\_\_ Time: \_\_\_\_\_ # of Men: \_\_\_\_\_ Approx. Hours: \_\_\_\_\_ x Rate \$ \_\_\_\_\_ = \$ \_\_\_\_\_

DISMANTLE: Date: \_\_\_\_\_ Time: \_\_\_\_\_ # of Men: \_\_\_\_\_ Approx. Hours: \_\_\_\_\_ x Rate \$ \_\_\_\_\_ = \$ \_\_\_\_\_

#### PAYMENT AUTHORIZATION:

- Check Check Number \_\_\_\_\_  
 Credit Card  Visa  Mastercard

Total Electrical \$ \_\_\_\_\_  
 Total Labor \$ \_\_\_\_\_  
 Grand Total \$ \_\_\_\_\_

Account Number:

Exp. Date: \_\_\_\_\_

Cardholders Name \_\_\_\_\_ Billing Address: Street: \_\_\_\_\_

Signature: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Event or Show \_\_\_\_\_ Booth Number # \_\_\_\_\_

Company Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Ordered By \_\_\_\_\_ Signature \_\_\_\_\_

Please Print Name