



747 Howard Street ~ San Francisco, CA 94103 ~ Phone: 415-974-4080 ~ FAX: 415-974-4065

## TELECOMMUNICATIONS ORDER FORM

| Contact Information      |        |                  |  |
|--------------------------|--------|------------------|--|
| Event Name:              |        | Event Date(s):   |  |
| Company:                 |        | Booth Number(s): |  |
| Contact On-Site:         | Phone: | E-Mail:          |  |
| <b>SEND RECEIPTS TO:</b> |        |                  |  |
| Company:                 |        | Attn:            |  |
| Address:                 |        |                  |  |
| City:                    | State: | Zip Code:        |  |
| Phone:                   | Fax:   | E-Mail:          |  |

### Terms and Conditions

1. San Francisco Convention Facilities (S.F.C.F.) is the exclusive telecommunication services provider for the Moscone Center and the Bill Graham Civic Auditorium
2. This order form gives S.F.C.F. authorization to:
  - a. Provide services (rearrangement and/or disconnection of service and equipment) and to handle negotiations of telecommunications services and equipment
  - b. Make appropriate charges on the credit card provided

**3. Service cancellations and refunds:**

| Order Changes/Cancellations              | Fee      |
|--|----------|
| Returned check service charge            | \$20.00  |
| Move an installed line                   | \$100.00 |
| Lost/damaged telephone instruments       | \$75.00  |
| Line cancellation before installation    | \$50.00  |
| Line cancellation after installation     | \$100.00 |
| Internet cancellation after installation | \$200.00 |

**There will be no cancellation of phone lines after the event begins  
Service refunds will be made within 30 days of the event close date**

**3. Equipment procedures:**

- a. Exhibitors can pick up telephone instruments or obtain help at the Telecommunications Service Desk
- b. Exhibitors are responsible for maintaining and returning equipment to the Service Desk after the show
- c. Rental equipment provided remains the property of S.F.C.F.
- d. Only S.F.C.F. personnel are authorized to modify system wiring and cabling
- e. All exhibitor brought equipment must comply with F.C.C. regulations

| METHOD OF PAYMENT   |   |
|---|---|
| Services will not be provided until completed order form and payment is received<br>REMAINING BALANCES WILL BE APPLIED TO CREDIT CARD ON FILE |   |
| <b>Payment by Check:</b>  | <input type="checkbox"/> Check (must ALSO enclose CC number)  |
| <b>Payment by Credit Card:</b>  | <input type="checkbox"/> American Express <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa |
| Credit Card Number:   | Expiration Date:  |
| Print Name on Card:   |   |
| Card Holder Signature:  |   |

Please fax/mail order form along with payment to:

**San Francisco Convention Facilities**, Moscone Center  
 Attn: Telecommunications Department  
 747 Howard Street  
 San Francisco, CA 94103-3118

|             |         |                  |  |
|-------------|---------|------------------|--|
| Event Name: |         | Event Dates:     |  |
| Company :   |         | Booth Number(s): |  |
| Phone:      | E-Mail: |                  |  |

**Order Form**

|   | Advanced Rate<br><small>10 business days before event</small> | Standard Rate      | TOTAL   | Includes:  |
|---|---|--------------------|---------|--|
| <b>TELEPHONE SERVICES</b>               |   |                    |         |  |
| <b>Basic Services</b>                   |   |                    |         |  |
| Single Line Telephone                   | _____ x \$250.00  | _____ x \$295.00   | = _____ | dial '9' to access outside line  |
| Multi Line Telephone                    | _____ x \$305.00  | _____ x \$355.00   | = _____ | Touch-tone telephone instrument, telephone line and dial tone  |
| Speaker Telephone                       | _____ x \$305.00  | _____ x \$355.00   | = _____ | Voice/fax/data analog unrestricted telephone service   |
| Deposit for Usage Charge                |   | _____ x \$75.00    | = _____ |  |
| <b>Additional Services</b>              |   |                    |         |  |
| Restricted Calls                        |   | _____ x \$15.00    | = _____ | Unused deposit balances are refundable   |
| Call Waiting                            |   | _____ x \$15.00    | = _____ | <b>** All calls including local and long distance calls are charged on a per minute basis. This includes telephones used for dial-up service</b> |
| Voicemail                               |   | _____ x \$25.00    | = _____ |  |
| Dry/Twisted Pair (within facility only) | _____ x \$395.00  | _____ x \$450.00   | = _____ |  |
| <b>INTERNET SERVICES</b>                |   |                    |         |  |
| Direct Internet                         |   |                    |         | Guaranteed DS3 (45Mbps) bandwidth provided by Priority Networks  |
|   | _____ x \$1,095.00  | _____ x \$1,295.00 | = _____ | Three IP addresses with 10 Mbps Ethernet (10 BaseT) connection per IP (hubs and cables not included)   |
|   |   |                    |         | One 10 Base T (CAT5) line to Fiber Optic backbone, RJ45 connector to booth   |
| Private Connect                         |   |                    |         | Servers and Gateways excluded- you must order Private Connect  |
|   | _____ x \$4,995.00  | _____ x \$5,595.00 | = _____ | Included separate connection up to T1 (1.5Mbps) bandwidth off the facility DS3 for internet connection only                                      |
|   |   |                    |         | Includes 29 IP address block<br>Includes 10 Base T (CAT5) line to Fiber Optic backbone, RJ45 connector to booth                                  |
| <b>Additional Services</b>              |   |                    |         |  |
| Additional IP Address                   | _____ x \$125.00  | _____ x \$150.00   | = _____ |  |
| Each additional Ethernet Cable          | _____ x \$25.00   | _____ x \$40.00    | = _____ |  |
| In-Booth Hub Rental                     | _____ x \$100.00  | _____ x \$150.00   | = _____ |  |
| <b>TOTAL DUE FOR ALL SERVICES</b>       |   |                    |         | = _____  |

Please specify phone and/or Internet location in booth-drawing below or attach a floorplan

Aisle No. \_\_\_\_\_

Aisle No. \_\_\_\_\_

Moscone Center \_\_\_\_\_ Front of Booth

Moscone West \_\_\_\_\_

Civic Auditorium \_\_\_\_\_

|                      |       |
|----------------------|-------|
| <b>SFCF USE ONLY</b> |       |
| Extension No.:       | _____ |
| Account No.:         | _____ |
| Instrument No.:      | _____ |
| Returned Phone(s):   | Y N   |