**CREDIT CARD MUST ACCOMPANY ORDER**

MAIL or FAX to:

**“Convention Photo by Joe Orlando, Inc.”**

2222 Foothill Blvd, Suite E-340, La Cañada CA 91011 • Phone: 1.626.639.3015 • Fax: 1.626.639.3772

**Servicing Trade Shows Nationally for over 25 years (CPJO)**

www.joeorlandophoto.com
e-mail: mail@joeorlandophoto.com

<table>
<thead>
<tr>
<th>QUANTITY SERVICES</th>
<th>EACH</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORIGINAL VIEWS</td>
<td>$95.00</td>
<td></td>
</tr>
<tr>
<td>No People</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Posed Staff</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crowd During Show</td>
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Additional Photo Services AFTER Original Ordered

<table>
<thead>
<tr>
<th>SERVICE DESCRIPTION</th>
<th>PRICE</th>
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<tbody>
<tr>
<td>HI RES DIGITAL IMAGE FROM ORIGINAL VIEW</td>
<td>$50.00</td>
</tr>
<tr>
<td>LOW RES DIGITAL IMAGE ORIGINAL VIEW</td>
<td>$35.00</td>
</tr>
<tr>
<td>COLOR 8x10 REPRINTS OF ORIGINALS</td>
<td>$25.00</td>
</tr>
<tr>
<td>PHOTOSHOP RETOUCHING</td>
<td>$160.00</td>
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Digital Photography Hourly Quotes
- Publicity, Banquets, Awards, On Site Image Delivery
- Green Screen (upon availability)
- Video Production (upon availability, call for quotes)

**SUB TOTAL:**

TAX: $15.00

**TOTAL:**

*After placing your order, no refunds within 30 days of the show*

PLEASE PRINT:

Name of Convention: ACG

Dates: Oct. 23-28, 2020

Convention Hotel / Location: Nashville, Tennessee

Daily Exhibit Hours:

Onsite Contact & Cell Phone Number:

Exhibitor: ____________________________________________________________________________ Booth # & Size: ____________________________________________________________________________

Display House: ________________________________________________________________________

Ship to Address: ________________________________________________________________________

Billing Address (C.C.): ________________________________________________________________________

City, State and Zip Code: ________________________________________________________________________

Telephone Number: (800) _______________ E-mail: ________________________________________________________________________

Authorized Signature: ____________________________

Credit Card Info: Please Circle One: [ ] American Express [ ] Visa [ ] MasterCard [ ] Credit Card-V code or Security Code: __________

Credit Card Number: ____________________________ Expiration Date: __________

Card Holder Name: ____________________________ Authorized Signature: ____________________________