Order Form

Your future business is in the cards... ExpoCard™.
Order now and maximize the impact of your trade show participation.

American Library Association Midwinter Meeting

January 11-14, 2008
Philadelphia, PA

For discount, order by 12/7/07
Final deadline to order prior to show 1/11/08
Order online: http://order.experient-inc.com
Access Code: PAPDXH

Step 1: *Select your lead retrieval system*

	on or before 12/7/07	after 12/7/07	# of units	TOTAL
Optium S400-*Instant transmission of leads to an on-board USB* Tabletop, printout, survey option, requires electricity	$285	$335	____	$_____
Legacy Standard-Tabletop, printout, survey option, requires electricity	$150	$175	____	$_____
Legacy Mobile-Hand-held, printout, survey option, battery operated	$225	$250	____	$_____
RealTimer-Hand-held, wireless, secure online lead access	$350	$350	____	$_____
ExpoCard Connect-Customizable software package for laptop/PC; includes cable and reader; laptop/PC not included	$400	$500	____	$_____
Each additional ExpoCard Connect	$250	$300	____	$_____
ExpoCard Pro-Complete customized lead management system with full support	Call for details			

Sub-Total $_____
7% Sales Tax $_____
Step 1 Total $_____

Step 2: *Select your lead retrieval options*

	on or before 12/7/07	after 12/7/07	# of units	TOTAL
Leads from Reader*				
Electronic download of leads at service desk; end of show*	$125	$150	____	$_____
Nightly download of leads at service desk*	$300	$400	____	$_____
Nightly download of leads in booth*	$500	$600	____	$_____
Custom Survey*				
(Submit custom template on back)	$75	$100	____	$_____
Additional Services				
Delivery of Reader to booth (Pickup not included)	$100	$100	____	$_____
Peel & Stick Labels*	$125	$125	____	$_____

* **Quantity should match the number of units ordered in Step 1**

Step 2 Total ** **$_____**

** **Taxable items and rates vary among states and are subject to change. Actual tax will be calculated and charged when order is processed. Please call for exact quote.**

Step 3: *Total your order (Step 1 Total + Step 2 Total)*

GRAND TOTAL $ _____

Step 4: *Your contact and payment information*

Exhibiting Company: _____

Booth #: _____

3rd Party Company (if applicable): _____

Check if information is for: ❑ Exhibiting Company ❑ Third Party

Contact Name: _____

Address: _____

City: _____

State/Country: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Order confirmation will be delivered via email.

Note: All ExpoCard readers must be picked up at the exhibitor services desk unless delivery arrangements are made and paid for in advance of the show.

Terms and Conditions:

- Orders cannot be processed unless received with payment. Purchase orders are not accepted. Send check or credit card information with order form.
- All orders are subject to a $50 cancellation fee.
- Orders cancelled within 30 days of the show will not be refunded.

Indicate payment method:

❑ Check (Must be mailed with order; made payable to Experient)

❑ Visa ❑ MC ❑ AMEX ❑ DISCOVER

Signature: _____

Card #: _____

Exp: ___/___/___

Fax Credit Card Orders to: 301.694.3286

Mail Orders to: Experient, 1888 North Market St., Frederick, MD 21701

For Assistance Call 800.787.0475 or 301.662.9400
Email: exhinfo@experient-inc.com
www.experient-inc.com

Showcode: ALA081 Source Code: KRO
(Different from access code at top of page)

ADDITIONAL FEE REQUIRED for Custom Survey Template

Company Name:_____ **Show Code:** _____

(See previous page, lower left corner)

Use the following samples and templates to create your electronic survey or custom printout.
(call Experient if you need assistance)

The **custom paper printout** for your **Optium S400 and Standard** will look something like this:
(You may use up to 70 lines with 32 characters per line)

Example:
Purchasing Time Frame:
_____ Immediately
_____ 2 to 3 months
_____ 4 months or more

Follow-up Action:
_____ Schedule Meeting
_____ Phone Call
_____ Send Literature
_____ Demonstration

Your **Mobile Electronic Survey** is a Question & Answer multiple choice style survey with "choose many" or "choose one" formats.
We recommend using no more than five to seven questions.
Your **Mobile** survey should look like this:

Question 1 (Max 70 characters)
Answer here (Max 40 characters each)

Question 2 (Max 70 characters)
Answer here (Max 40 characters each)

Example:
What type of health care facilities do you service? (Choose all that apply)
- ❑ Public Hospitals
- ❑ Private Hospitals
- ❑ Walk-in Clinics
- ❑ Elder Care Facilities
- ❑ Other

Your **RealTimer Survey** is a Question & Answer single choice style survey.
Your **RealTimer** survey should look like this:

Question 1 (Max 30 characters)
Answer here (Max 30 characters each)

Question 2 (Max 30 characters)
Answer here (Max 30 characters each)

Example:
Purchase Authority
Final Say/Recommends
Have Salesperson call
Yes/No
Purchase Time Frame
3 months/6 months/1year

**only the selected answer will appear*

Use the following space to design your electronic survey or custom printout. (Use additional paper if needed).

FAX this to us along with your order form and we will program your survey/printout.

FAX TO: 301.694.3286 or mail with your order form

experient

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