



BOOTH LABOR



JULY 10 – 12 , 2019
CENTRO CITIBANAMEX

COMPANY NAME :		BOOTH NUMBER :	
STREET ADDRESS :			
CITY :	STATE :	ZIP :	COUNTRY :
CONTACT NAME :		E- MAIL ADDRESS :	
TELEPHONE : ()	FAX : ()		

ORDER DEADLINE: MAY 24, 2019

PRICE PER PERSON AND PER HOUR: USD \$22.00 PLUS 16% TAX (MINIMUM SERVICE 3 HOURS)

Fill in the next information:

MOVE In: Persons: Day: From ___ : hrs TO ___ : hrs. Total time:

MOVE Out: Persons: Day: From ___ : hrs TO ___ : hrs. Total time:

DESCRIPTION OF LABOR: _____

NOTE: This price is only for easy tasks like carrying, cleaning, moving boxes, etc. If you need specialized workers like Electricians, painters, carpenters, etc., the price is different. Please ask for it.

Sub Total:	<input type="text"/>
tax 16%	<input type="text"/>
Total	<input type="text"/>

NOTE: Any request after MAY 24, 2019, WILL NOT BE ACCEPTED.

Payment should be made by wire transfer to the next account:

Beneficiary: **SERVICIOS Y MONTAJES DE EXPOSICIONES S.A. DE C.V**

Beneficiary's Bank: **BANCO MERCANTIL DEL NORTE SA (BANORTE)**; Account number **0168438721**;

key number for wire transfer **072580001684387214**, Swift **MENOMXMT**; Location **NUEVO LEON, MEXICO**; branch **2499**

ABA: 026-009-593

PAYMENT SHOULD BE MADE BEFORE MAY 24, 2019

QUESTIONS: Tel. (52 81)80002222 ext. 103.

[Eliud Herrera/ eliudh@ormex.com](mailto:Eliud.Herrera@ormex.com)

ADDRESS: Ave. Fundidora # 501 I-10 1er Nivel CINTERMEX Col. Obrera 64010 Monterrey N.L MEXICO



CREDIT CARD AUTHORIZATION



COMPANY NAME :		BOOTH NUMBER :	
STREET ADDRESS :			
CITY :	STATE :	ZIP :	COUNTRY :
CONTACT NAME :		E- MAIL ADDRESS :	
TELEPHONE : ()		FAX : ()	

BANK TRANSFER

BENEFICIARY: SERVICIOS Y MONTAJES DE EXPOSICIONES ,S.A. DE C.V
 INTERMEDIARY BANK : BANCO DE NEW YORK, NEW YORK USA.
 ABA: 021-000-021
 BENEFICIARY BANK :BANCO MERCANTIL DEL NORTE,S.A.
 CIUDAD: MONTERREY, MEXICO.
 SWIFT BIC: MENOMXMT

CREDIT CARD PAYMENT AUTHORIZATION

AMERICAN EXPRESS

AMERICAN EXPRESS CARD N°.: _____ (15 DIGITS)

EXPIRATION DATE: _____

NAME: _____ (CARD HOLDER)

SECURITY CODE: _____ (4 DIGITS ABOVE CARD NUMBER)

I _____ AUTHORIZE SERVICIOS Y MONTAJES DE EXPOSICIONES, S.A DE C.V.
NAME

TO CHARGE THE AMOUNT OF: \$ _____ USD (_____)
WRITTEN AMOUNT

 SIGNATURE OF CARD HOLDER

Also you can pay on site with VISA and MASTER CARD.

QUESTIONS: Tel. (55) 80 00 22 22 ext 103

[Eliud Herrera eliudh@ormex.com](mailto:Eliud.Herrera.eliudh@ormex.com)

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