500 Interstate W. Pkwy Lithia Springs, GA 30122
Ph: 678-398-2650
Fax: 770-745-4267
email: aphillips@mc-2.com

Payment Policy: Full estimated payment must be received prior to show move-in to guarantee forklift \& workers. Please use the formula above to calculate your advance payment. Final invoicing will be done from the actual hours worked.

| Exhibiting Company Name: | Telephone\#: | Booth\#: |
| :--- | :--- | :--- |
| Billing Address: | Fax\#: |  |
| City/State/Zip: | Authorized By: |  |
| Show Name: <br> ENERGY EXCHANGE 2024 |  |  |

## Labor \& Equipment Rates

Exhibitors requiring forklifts to assemble displays or when uncrating, unskidding, positioning and reskidding equipment and machinery will need to estimate their needs below. A forklift is required for moving equipment or materials weighing 200lbs or more. If you require a forklift, a crew will be assigned consisting of a forklift with an operator and 1 worker(s). If you do not require a forklift, order the number of workers required.

| HOURLY RATES | Weekdays and All Day | Forklift/Operator | Additional Labor |
| :--- | :--- | :---: | :---: |
| Straight Time | $8: 00 \mathrm{am}$ to 4:30pm Weekdays | $\$ 370.00$ | $\$ 141.00$ |
| Overtime | $4: 30-8: 00 a m$ Monday-Saturday | $\$ 430.00$ | $\$ 210.00$ |
| Doubletime | All day Sunday and Holidays | 489.00 | $\$ 281.00$ |

The minimum charge for labor is one (1) hour per worker. Gratuities in the form of labor hours for work not actually performed are prohibited and will not be honored by $\mathrm{MC}^{2}$. All rates are subject to change if necessitated by increased labor and material

## Order

Reserve forklifts and/or labor below. Starting times can be guaranteed only when labor is requested for 8:00am. Confirm labor and forklifts by $2: 30 \mathrm{pm}$ the day before date requested. Please have a representative pick up the crew at the Service desk and supervise the work to be done. Upon completion, the exhibitors representative will return the crew to the Service desk and approve the work order.

## We Will Need:



| Date | Time (AM) (PM) | No. of Forklift Crews | No. of Extra Workers |
| :---: | :---: | :---: | :---: |
|  |  |  |  |
|  |  |  |  |

*Allow time for return of empty containers
Describe work to be done:

| Number of Crews and/or Workers Needed x Hours Per Worker = TOTAL ESTIMATED HOURS <br> TOTAL ESTIMATED HOURS X RATE $=$ PAYMENT |
| :---: |
| TOTAL PAYMENT ENCLOSED |

## THE MC2 CHECK/CREDIT CARD AUTHORIZATION MUST BE FILLED OUT BEFORE THIS ORDER CAN BE PROCESSED

