

**INNOVATIONS PRODUCT RETURN FORM**  
**PLEASE FAX BACK BY**  
**FRIDAY, DECEMBER 3, 2004**  
**ATTN: Roz Graham**  
**703.907.4188**

**PRODUCT PICK UP WILL NOT BE AVAILABLE AND WILL BE  
RETURNED VIA SHOW COURIER.**

PRODUCT: \_\_\_\_\_

PRODUCT: \_\_\_\_\_

PRODUCT: \_\_\_\_\_

PRODUCT: \_\_\_\_\_



**EXHIBITING HONOREE** (shipping will be charged to your GES account of record):

BOOTH NUMBER: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_



**NON-EXHIBITING HONOREE** (Please provide credit card information below):

ATTN: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS 1 \_\_\_\_\_

ADDRESS 2 \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

COUNTRY \_\_\_\_\_

PHONE \_\_\_\_\_

\_\_\_\_ AMEX      \_\_\_\_ MC      \_\_\_\_ VISA      \_\_\_\_ DISCOVER

CREDIT CARD NUMBER: \_\_\_\_\_ EXP DATE: \_\_\_\_\_

CARDHOLDER'S NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

NOTE:

PLAQUES WILL BE AVAILABLE FOR PICK UP BEGINNING TUESDAY JANUARY 4, 2005 AT 10:00 AM AT THE INNOVATIONS  
PLAQUE OFFICE, INNOVATIONS PLUS, CENTRAL PLAZA.