



## Order Receipt

**Order #** 20110  
**Date** 7/28/2011 8:58:10 AM  
**Status** Accepted

### Remit To

TEST Alliance Exposition Services  
44880 Falcon Place  
Suite 113  
Sterling, VA 20166  
USA  
703-528-2001

### Invoiced To

Philadelphia Insurance  
Companies  
Mrs. Connie Denton  
One Bala Plaza  
Suite 100  
Bala Cynwyd, PA 19004  
USA

**Show Name** NACHA TEST show  
**Booth** 903 (10 x 10)

**Payment Method** Credit Card

**Credit Card** Susan Horstmann  
Visa \*\*\*\*\*4137

| Qty                 | Unit Price     | Description                                  | Fees  | Sales Tax | Amount           |
|---------------------|----------------|--|---|-----------|------------------|
| 3                   | 50.93 each     | Standard Furniture<br>Folding Side Chair     | Late Fee: 61.12<br>Additional Charges: 0.00 | 17.33     | 231.24           |
| 2                   | 4.67 per Sq Ft | Carpet<br>Prestige Carpet                    | Late Fee: 3.74<br>Additional Charges: 0.00  | 1.06      | 14.14            |
| 0                   | 4.67 per Sq Ft | Carpet<br>Prestige Carpet                    | Late Fee: 0.00<br>Additional Charges: 0.00  | 0.00      | 0.00             |
| 1                   | 151.67         | Standard Furniture<br>Draped Table 6'x2"x30' | Late Fee: 0.00<br>Additional Charges: 0.00  | 12.29     | 163.96           |
| 1                   | 24.15 each     | Standard Furniture<br>Wastebasket            | Late Fee: 0.00<br>Additional Charges: 0.00  | 1.96      | 26.11            |
| <b>Order Total:</b> |                |  |   |           | <b>\$ 435.45</b> |

Thank you for your order!