



OCT 27-29, 2022 - ORLANDO, FL

# Global Produce & Floral Show

Connect with all your global fresh produce and floral peers in one place.

## EXHIBIT PHOTOGRAPHY ORDER FORM

<b>f-stop Photography, LLC</b> <b>5001 Alexander Dr.</b> <b>Metairie, LA 70003</b> <b>504-957-2450</b> <b>www.fstopphotography.net</b> <b>orders@fstopphotography.net</b>	EXHIBITOR NAME _____ BOOTH # _____ ON-SITE CONTACT _____ CONTACT PHONE # _____
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### EXHIBIT PHOTOGRAPHY

_____ Hi-resolution digital file per view – Electronic delivery only included	\$185.00 ea = \$ _____
_____ 8 X 10 original view plus hi-resolution digital file (shipping & handling fees apply)	\$220.00 ea = \$ _____
_____ 8 X 10 Original view – print only (shipping & handling fees apply)	\$165.00 ea = \$ _____
_____ Multi-view economy package - 8 views (minimum) or more - # of views _____ @	\$160.00 ea = \$ _____
_____ high-resolution digital files only – E-Delivery (\$200 minimum savings)	
_____ Additional 8 X 10 reprints of original view	\$25.00 ea = \$ _____
_____ CD of all views (E-Delivery included)	\$25.00 ea = \$ _____
Shipping & Handling (CD & print orders only) \$ _____ 15.00	
<input type="checkbox"/> Empty Booth _____ <input type="checkbox"/> Activity During Show _____	
<b>TOTAL    \$ _____</b>	
<input type="checkbox"/> Staff Photo – Date _____ Time _____	

### EDITORIAL & PUBLIC RELATIONS PHOTOGRAPHY

Used for in-booth presentations, special events, award ceremonies, receptions and seminars. Does not include photos of whole booth/exhibit with or without people.

_____ 1-Hour photography coverage, at convention site*	\$350.00 hr = \$ _____
Includes E-Delivery.all images on CD/DVD.	
(*During show hours only. Off-site events require a 2-hours minimum payment.)	
_____ Additional hours including all images on CD	\$200.00 hr = \$ _____
Shipping & Handling \$ _____ 15.00	
<b>TOTAL    \$ _____</b>	

Bill / Ship to: Company \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Check Enclosed     VISA     MC     AMEX # \_\_\_\_\_

Exp. Date \_\_\_\_\_ Security # \_\_\_\_\_ Card Holder's Zip Code \_\_\_\_\_

Card Holder Name \_\_\_\_\_ Signature \_\_\_\_\_