



- Cleaning is an exclusive service. This includes all floor services and trash removal.
- Orders received after the deadline or without payment will be charged the Standard price.
- Prices are based on the total square footage of the booth regardless of the area to be cleaned.
- Exhibit and furnishings wipe down not included.
- Cancellations received 10-days or less prior to the first day of exhibitor scheduled move-in will be billed at 100%.
- Cleaning includes emptying wastebasket within your booth at the time of vacuuming and/or shampooing.
- 100 square foot minimum applies for all services listed.
- Excessive trash will be subject to an additional fee for dismantling and disposal.

Order online at [cyberservices.theexpogroup.com](https://cyberservices.theexpogroup.com)

**CARPET CLEANING**

**One-time Vacuuming \***

	Price per Square Foot			Advance Price	Standard Price	Total
Booth Dimensions:	_____ X _____	=	_____ Sq. Ft. @	\$0.45	\$0.60	= _____

**Daily Vacuuming (3 days)**

Booth Dimensions:	_____ X _____	=	_____ Sq. Ft. @	\$1.35	\$1.80	= _____
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**One-time Shampooing of booth \***

*\*Subject to availability*

Booth Dimensions:	_____ X _____	=	_____ Sq. Ft. @	\$0.65	\$0.95	= _____
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**Daily Shampooing (3 days)**

*\*Subject to availability*

Booth Dimensions:	_____ X _____	=	_____ Sq. Ft. @	\$1.95	\$2.85	= _____
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\* Please indicate days for one-time vacuuming and/or shampooing:  Monday  Tuesday  Wednesday

**PORTER SERVICE**

Porter Service includes emptying wastebaskets at 2-hour intervals during show hours. \*  
Vacuuming service not included, must be ordered separately.

Size	# of Days		Advance Price	Standard Price	Total
0-500 sq. ft.	_____	@	\$ 71.25	\$102.00	= _____
501-1500 sq. ft.	_____	@	\$ 93.75	\$134.00	= _____
1501-3000 sq. ft.	_____	@	\$116.25	\$166.00	= _____
3000 sq. ft. and up	_____	@	Call for Quote	Call for Quote	= _____

\* Please indicate days for porter service:  Monday  Tuesday  Wednesday

**ADDITIONAL INFORMATION**

**CALCULATING YOUR TOTAL**

Can't find it? Please call your Customer Service Manager with any questions, needs or special requests.

**TOTAL** \_\_\_\_\_

Exhibiting Company: \_\_\_\_\_ Booth Number: \_\_\_\_\_  
 Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_