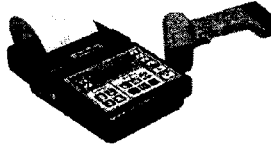


LEAD RETRIEVAL ORDER FORM

**2002 USENIX Technical Conference
 Doubletree Hotel - Monterey, CA
 June 10 - 15, 2002
 Show code: 11989**



PCR Corporation
 Lead Retrieval Division
 500 West 37th Street New York, NY 10018
 Phone: 888-601-0200 Fax: 212-377-1754
 www.pcrrent.com

LEAD RETRIEVAL EQUIP.	IF ORDERED BY: May 10, 2002	IF ORDERED AFTER: May 10, 2002	ONSITE RENTAL	QUANTITY	TOTAL PRICE
Expo Lead Scanner System includes scanner, display, hard copy printout and diskette of attendee information saved as a text file.	\$250.00	\$275.00	\$300.00		
ACCESSORIES					
Additional Roll of Paper	\$10.00	\$15.00	\$20.00		
Keyboard	\$15.00	\$20.00	\$25.00		
Battery	\$75.00	\$85.00	\$95.00		
Pole Display	\$95.00	\$110.00	\$125.00		
ADDITIONAL SERVICES					
Custom Qualifying Questions Charge includes tailoring up to 50 qualifying questions no more than 25 spaces in length to suit specific needs.	\$50.00	\$75.00	\$95.00		
Delivery & Setup* Includes delivery and setup at booth, and technical training on the equipment.	\$50.00	\$75.00	\$95.00		
*All equipment must be picked up from and returned to the PCR service desk unless delivery arrangements have been made.				Tax: 7.25%	
*Delivered units must be returned to the PCR Service Desk by exhibitor at the end of the event.				TOTAL	





TERMS & CONDITIONS/CREDIT CARD CHARGE AUTHORIZATION

1. To ensure your order is processed, please sign and fax this Authorized Order Form to the number listed above. Orders must be cancelled at least 1 week prior to delivery to avoid a cancellation fee. The cancellation fee is 50% of the total charge for orders cancelled 5-7 days prior to the show and 100% of the total charge for orders cancelled within 5 days of the show. Delivery charges apply to all cancellations.

2. The total rental amount will be processed 3-10 business days prior to delivery.

I hereby authorize PCR to charge my credit card account (identified below) for: the total rental amount (identified above); any applicable cancellation fees; and, any other amounts due to PCR. Further, I hereby authorize PCR to charge my credit card account (identified below) for the repair or replacement cost (as applicable) of the damaged and/or lost or destroyed equipment.

EXHIBITOR INFORMATION: CREDIT CARD INFORMATION:

Ordered by: _____	Visa  MC  AMEX  Discover 
Company Name: _____	Cardholder's Name: _____
Address: _____	Credit Card #: _____ Exp. _____
City: _____ State _____ Zip Code: _____	Cardholder's Signature: _____
Phone: _____	Cardholder's Address: _____
Fax: _____	City: _____ State _____ Zip Code: _____
Email Address: _____	Cardholder's Phone: _____
Show Contact: _____	
Booth Number: _____	
Delivery Date*: _____	
Delivery Time*: 9-11AM 11-1PM 1-3PM 3-5PM	

